License to Use

Hoosier Youth Chronicling COVID-19

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1. Completed *Hoosier Youth Chronicling COVID-19* questionnaire
2. Photographs taken or artwork created (Include brief description of submitted photographs or artwork. Example: "1 picture of me playing with my dog.")

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_____	_____	_____
Child's Name Printed	Child's Name Signed	Date

As the above-named child's parent/legal guardian, I/we have fully read, understand, and agree to all of the above and are over the age of 18 years of age.

_____	_____	_____
Parent/Legal Guardian's Name Printed	Parent/Legal Guardian's Name Signed	Date
_____	_____	_____
Parent/Legal Guardian's Name Printed	Parent/Legal Guardian's Name Signed	Date

Please provide contact information for at least one parent/legal guardian (Contact information will not be published or used for any purpose aside from any necessary follow up related to this submission.)

Address: _____

Phone: _____ Email: _____