Greetings, Parents and Guardians of the next generation of Jane Goodalls.

Your young person has joined a global movement to make the world a better place for people, other animals and our environment. Jane Goodall's Roots & Shoots was started in 1991 by renowned primatologist and U.N. Messenger of Peace, Dr. Jane Goodall and now engages young people in 100 countries in sustainability projects and campaigns led by the youth themselves.

To assist in improving our programme, we often require photos and video of Roots & Shootsers in action. Please fill out this model release form if you agree to permit the Jane Goodall Institute of New Zealand to use images of your child/ward and return to their educator.

The Jane Goodall Institute of New Zealand is one of 25 Jane Goodall Institutes around the world and furthers the work of Dr. Jane Goodall through community centred change projects in Africa and the Roots & Shoots programme that increases the empowerment and sustainability education of young New Zealand.

If you have any questions—about Jane Goodall's Roots & Shoots, the Jane Goodall Institute of New Zealand or this model release form—please feel free to contact me.

Thank you,

Melanie Vivian CEO & Founder

Jane Goodall Institute New Zealand

m.vivian@janegoodall.org.nz

Molanie Vain



Model Release

In consideration of myself, (my child or my ward), as a model, upon the terms herewith stated, I hereby give to the Jane Goodall Institute, its staff, and affiliates:

- a) the unrestricted right and permission to copyright and use, re-use, publish, and republish photographs and video of myself, (my child or my ward), now or hereafter known for illustration, art, promotion, advertising, trade, or any other purpose whatsoever.
- b) I hereby relinquish any right that I may have to examine or approve the completed product or products or the advertising copy or printed matter that may be used in conjunction therewith or the use to which it may be applied.
- c) I hereby release, discharge and agree to save harmless the Jane Goodall Institute, its staff, and affiliates from any claims for libel or invasion of privacy.
- d) I understand that no compensation will be forthcoming.
- e) I hereby affirm that I am over the age of majority and have the right to contract in my own name (the name of my child or ward). I affirm that I am the parent or legal guardian of my child or ward. I have read the above authorization, release and agreement, prior to its execution; I fully understand the contents thereof. This agreement shall be binding upon me (my child or my ward).

Date:	
Minor's Name:	
Parent or Guardian Name (printed):	
Parent or Guardian Name (signed):	
Address:	
City:	Postal Code: