



**AMERICAN  
HELICOPTER  
MUSEUM & EDUCATION CENTER**

In the Heartland of Helicopter Innovation

**Girls in Science and Technology Program  
2017 – 2018**

**Photo and Video Release Form**

I hereby give my consent for my daughter, \_\_\_\_\_,  
age \_\_\_\_\_, to be photographed and videotaped while participating in the  
Girls in Science & Technology Program (GIST). I understand that the photographs and  
video may be used by the GIST and the American Helicopter Museum and Education  
Center for marketing purposes.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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