**<insert agency name & logo>**

**Participant Consent Form for a Minor**

Thanks for taking the time to speak with us. Please read the statement below and sign and initial where indicated. This form must be completed and signed by the parent or legal guardian of individuals who are under the age of 18 years.

**Purpose**

This consent form relates to discussions that your child will have with <insert agency’s> employees or agent as part of a project regarding <insert project name & sufficient description> (“Project”). All permissions you grant in this consent form will only be used in connection with the Project.

**Participation is Voluntary**

I am the parent or legal guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (“my child”), who, with my permission below, will participate in discussions related to the Project with <insert agency>employees. I understand that my child is voluntarily participating in these discussions and is under no obligation to do so. I understand that if my child is uncomfortable at any point, you or he/she may inform the agency employee of his/her wishes to limit or end his/her participation in the Project. I also understand that my consent to allow my child’s participation is voluntary, and that no other benefit or service of the City of New York or <insert agency> will be affected in any way by my decision to grant or withhold my permission below. I further understand that I only should initial the specific area(s) of permission to which I agree.

**Permission**

*Remove this note in your final document:*Only present the interview subject with the types of documentation you’re doing in that specific session. For example, if only taking written documentation and photographs, you would not present audio or video.

In relation to the Project, I hereby authorize and permit employees of <insert agency> and its agent, to:

Page 1 of 2

|  |  |
| --- | --- |
| * **use written documentation** relating to discussions with my child.   This includes, but is not limited to handwritten and digital notes. | Initials \_\_\_\_\_ |
| * **publish written documentation** of these discussions with my child.   This includes quotes, stories, and summaries of what my child says. | Initials \_\_\_\_\_ |
| * **record the audio** of discussions with my child.   This includes, but is not limited to audio recording via digital or tape. | Initials \_\_\_\_\_ |
| * **publish audio recordings** of discussions with my child.   This includes quotes of what my child says. | Initials \_\_\_\_\_ |
| * **photograph** my child’s image and likeness.   This includes, but is not limited to photographs. | Initials \_\_\_\_\_ |
| * **publish photographs** of my child’s image and likeness.   Note that <insert agency> will not publish your child’s name with his/her photograph without your permission | Initials \_\_\_\_\_ |
| * **videotape** my child’s image and likeness.   This includes, but is not limited to videos. | Initials \_\_\_\_\_ |
| * **publish video** of my child’s image and likeness. | Initials \_\_\_\_\_ |

**Property**

I release the City of New York and <insert agency> (“City”) and its officers, employees, and agents from any and all legal liability that may arise in connection with the City’s use of any written documentation, photograph, video, or audio in accordance with the terms of this consent form. I understand and agree that, with my permission above, all written documentation, photographs, videotapes, and audio tapes made of and/or by my child in relation to the Project shall be the exclusive property of the City and will only be used for a purpose related to the Project. I agree that by granting <insert agency> permission to publish the above written documentation, audio, photographs, and/or videos, <insert agency> may, in its sole discretion, use these materials as it sees fit in any medium or forum in relation to the Project. I understand that <insert agency> will not use, publish, or make public any of the written documentation, photographs, video, or audio for which I did not grant permission above.

**Compensation**

*Remove this note in your final document:*Only present No Compensation OR Gift Cards option, not both.

No Compensation

I understand and agree that neither I, nor my child, will be compensated in any way for the use of my child’s name and/or likeness by <insert agency> or the written documentation, photographs, videotapes, or audio recordings described above.

Gift Card for Participation

I understand that any gift card received in exchange for my child’s participation in the Project, even of minimal value, may be considered taxable income to me. I understand that the City of New York will not provide me with any documentation for tax reporting purposes unless it is required to do so by applicable tax law. It is recommended that you consult with a tax professional if you have any tax questions related to a gift card received in connection with your child’s participation in this Project.

Minor’s Name (printed): Age:

Parent/Guardian Signature: Date:

Parent/Guardian Name (printed):

Page 2 of 2