



## **TALENT RELEASE FORM FOR DATA STORYTELLING COMPETITION 2025**

Instructions: If you consent to your child's participation in the [Data Storytelling Competition 2025](#), please complete and submit this form to via email at [widsttgroup@gmail.com](mailto:widsttgroup@gmail.com). You must first ensure that the team your child is participating in is also registered for the competition [here](#). The signed Parental Consent Form is also required.

VIDEO TITLE: \_\_\_\_\_

PRODUCER'S/ CREATOR'S NAMES:

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PRODUCTION COMPANY:

RECORDING LOCATION:

DATE:

I understand that this release authorises the Producer to make use of my appearance/recordings/materials/voice, for the above-mentioned video.

I understand that I am to receive no talent compensation or any other compensation as it relates to this video. The Producer shall have complete ownership of all photographs, video recordings, audio recordings and/or written extractions, in whole or in part, of such recordings or musical performances for the purpose of illustration, broadcast, or distribution.

I give the Producer the right to use my name, likeness and biographical material to publicise the programme and the services of the Producer.

The Producer may:

1. Photograph me and record my voice and likeness for the purpose of the production mentioned above, whether by film, videotape, magnetic tape, digitally or otherwise;
2. Make copies of the photographs and recordings so made;
3. Use my name and likeness for the purposes of education, promotion and/or advertising of the programme, recordings and any copies so made, through mass media and the internet.

I further understand the master tape/copy remains the property of the Ministry of Education, Trinidad & Tobago and that there will be no restrictions on the number of times that my name and likeness may be used.



Women in  
Data Science  
Worldwide

Trinidad & Tobago

## TALENT INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Contact: \_\_\_\_\_

School: \_\_\_\_\_

I, the undersigned, hereby state that I am the Mother/Father/Guardian of the above-named Talent and do hereby consent and give my permission to this agreement.

Parent/Guardian (print name): \_\_\_\_\_

ID/DP/Passport Number No.: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Principal: \_\_\_\_\_

School Stamp: \_\_\_\_\_

Date: \_\_\_\_\_