MU$EUM OF AMERICAN FINANCE

Consent to Photograph or Film

Project: 2026 Museum Finance Academy (MFA) Participant Videos

Printed Name: _____

Address: _____

Email: _____ Phone: _____

I hereby consent to the participation in interviews, the use of quotes and the taking of photographs or videos of myself. I grant the right to edit and use said products for non-profit purposes including use in print, online and all other forms of media. I also hereby release the Museum of American Finance and its agents and employees from all claims, demands and liabilities in connection with the above.

Signature of student:

_____

Date: _____

Signature of parent or guardian (if student is under 18 years of age):

_____

Date: _____