Ministry of Economic Development and Growth

Ministry of Research, Innovation and Science

Signature of Student

Commercialization and Scale-up Networks Branch

56 Wellesley Street West, 5th Floor Toronto ON M7A 2E7 Ministère du Développement économique et de la Croissance

Ministère de la Recherche, de l'Innovation et des Sciences

Direction des réseaux pour la commercialisation, le démarrage et l'expansion

56, rue Wellesley Ouest, 5e étage Toronto ON M7A 2E7



RELEASE AND CONSENT FORM

Without limiting the generality of the foregoing, I allow the Ministry of Economic Development and Growth to use my personal information including my name, my image and/or a description of my summer job for the purposes of promoting the Summer Company Program, in media communications of any kind produced by or on behalf of the Ontario government. I understand and agree that media communications will include but not necessarily be limited to: the Ministry of Economic Development, and Growth's website; social media such as Twitter, Facebook, LinkedIn, YouTube, etc.; newspaper/magazine articles; photos; brochures; and advertisements. I waive any right to inspect or approve the finished media communications.

I agree to waive any and all rights that I may have to use the information and images referred to in this form and agree that any such information and images shall hereafter remain the exclusive property of the Ministry of Economic Development and Growth. Use of the information and images will be made without any acknowledgement or payment to me.

I release and agree to hold harmless the Ministry of Economic Development and Growth, its employees, representatives, agents and assigns, from all actions, claims and demands arising from the Ministry's use and disclosure of my image, my name and/or a description of my summer job in the production, reproduction or distribution of any of the media communications.

I have read this Release and Consent and t and Protection of Privacy Act before signing	the Notice of Collection under the <i>Freedom of Information</i> g below, and I understand the contents.
Date	Name of student (please print)

Address

The following is to be completed for Summer Company Program participants under 18 years of age.

I hereby certify that I am the parent or guardian of the above-named minor who is under the age of 18 years. For the consideration above, I consent that any images of the minor, recordings of the minor's voice, use of the minor's name and/or descriptions of the minor's Summer Company Program initiative which have been or are about to be recorded by or on behalf of the Ministry may be used and disclosed by it for the purposes and under the rights set out above, signed by the minor, with the same force and effect as if executed by me.

Doto	Name of Parent or Cuardian (places print)
Date	Name of Parent or Guardian (please print)
Signature of Parent or Guardian	Address