ReACT Consent Form

2024-2025

Full Name:	
Coalition Name:	
 Purpose: You have been invited to participate in ReACT Montana's to movement to create the first-ever tobacco-free generation, support Montana Tobacco Use Prevention Program (MTUPP). This consent all MTUPP to use captured pictures and testimonies to be shared on promedia accounts and event advertisements. Procedure: During this activity, you will participate in a youth-led might include attending events in-person or virtually, participatin campaigns, etc. You will work directly with the ReACT Youth Engage Ashley Burke, on the development, implementation, and execution 	ted by the llows ReACT and ogram social program. This g in social media gement Specialist,
 Please reach out to Ashley Burke at <u>Ashley.rollinburke@mt.gov</u> w You can choose to participate in different program events or car at any time during the year. 	npaigns and stop
 Benefits and Risks: Participation will benefit you, the ReACT program teens across Montana. However, risks may include travel when Montangerous in the winter. Attending an in-person event will be up to to Youth Leader. 	tana roads are
 Confidentiality and Consent: If you want to participate, please responsementarily privacy by not disclosing any content discussed during the signing below, you agree that MTUPP may use your captured photographs, comments, or any other information you may offer regactivity without obligation of any kind on the part of MTUPP. I would know that you agree to waive all claims for using your testimonies, or photography, and comments by ReACT. 	nis activity. By graphy, arding this also like to let you
Name of Student:	
Signature of Student:	
Name of Parent/Guardian:	
Signature of Parent/Guardian:	