

**SUPPLEMENTAL PARENTAL CONSENT FORM  
FOR OUTSIDE MEDIA COVERAGE OF OUTCASTING,  
PUBLIC RADIO'S LGBTQ YOUTH PROGRAM**

**OutCasting is a production of Media for the Public Good, Inc.,  
a 501(c)(3) nonprofit public media organization giving voice to  
issues and perspectives underrepresented in the mainstream media**

Dear Parent or Guardian:

As we indicated in the main Parental Consent Form authorizing your child's participation in OutCasting, public radio's LGBTQ youth program, we are committed to protecting your child's identity. However, as a result of our efforts to promote OutCasting in the press and other media channels, various media have published articles or other news items about OutCasting and its participants, and they have requested permission to photograph some student program participants and/or to identify them in the articles or other news items. As we continue to promote the program, this activity will continue.

We will not authorize identification of any student participants in the program or publication of their photographs unless you and your child agree by signing this Supplemental Parental Consent Form. Your child's participation in OutCasting is in no way conditioned on your signing this Form. If you do sign this Form, you or your child may revoke the authorization given at any time, recognizing that any publication that occurred prior to the revocation cannot be recalled.

If you and your child wish to consent to your child's name, image, or other identifying information being published in connection with OutCasting, please check the appropriate boxes below. Both you and your child should sign in the spaces provided.

Please note that any consent given on this Supplemental Parental Consent Form will override the limitations on the original Parental Consent Form.

Thank you for your consideration.

Marc Sophos  
Executive Director, MFPG  
Executive Producer, OutCasting

**MFPG/OutCasting Supplemental Parental Consent Form**

I hereby consent to the publication of the

- image
- first name
- first and last name
- name of school attended
- name of home town
- other identifying information

of my child, \_\_\_\_\_, on MFPG and other media involved in the production, dissemination, and promotion of the Program (the "Related Media").

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Participant Name	Signature	Date
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Parent/Guardian Name	Signature	Date
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