Dear Parent/Guardian:

Your signature on this letter grants your permission to the Museum of the City of New York to consider your child’s work for an online exhibition of student work following their participation in a virtual MCNY program. In these programs, students see highlights from the Museum’s collections and take part in art-making activities during and following the program.

Students are invited to submit photos of artwork created based on these virtual programs to be considered for a student gallery of work on the Museum of the City of New York’s website. All submissions of student artwork will be considered and a selection of submissions will be shown on the website.

Photos of artwork may be used by the Museum of the City of New York to document virtual programs and may appear in a report, publication, webpage, or other media about or by the Museum of the City of New York.

By signing below, you are giving your permission for the following items:

- My child’s artwork and my child’s signature, if visible in the artwork or photograph, may be published, republished, reproduced, edited, exhibited, used, or distributed by the Museum of the City of New York to support its education programs featuring student art.
- I understand that if my child submitted a photograph of themselves (self-portrait) or someone else who they know (portrait), that they (or if minor, their parent or guardian) have given consent to show it on the Museum’s website featuring student submissions.

☐ Check here if you read and agree to the terms above
Complete information and signatures below are required for internal use only.

Name of Child ___________________________________________________________________

Location (Include borough, if in NYC, or city and state or country if outside of NYC)_____________________ School ____________________________ Grade _____

Parent/guardian signature ____________________________________________________________

Please print parent/guardian name ______________________________________________________

Parent/guardian email address _________________________________________________________

Parent/guardian Phone Number __________________________________________________________

Date ______________________________________________________________________________

Image Caption for Website: Which option do you prefer? Check the box according to your preference.

_____ YES - Display student’s first name and age with their work of art. If “YES” – fill out the following as you would like it to appear in the caption:

First Name: Age:

_____ NO – Do not display a caption or information next to work of art

Thank you.

Please email this signed Student Artwork Submissions Permission Forms to familyprograms@mcny.org along with a digital image of the student’s artwork.

If you have any questions about this permission form, please email the Museum of the City of New York at familyprograms@mcny.org.