



2023 HBHAS Emancipation Flagraising Ceremony, Burlington City Hall

This form authorizes _____ to participate with the Halton Black History Awareness Society (HBHAS) in its 2024 Halton Black History Research project (Narrative, Video or Spoken Word). Please fill out the information below. All individuals under 16 years old must have their parent/guardian signature confirming their authorization to participate and for the HBHAS to use the student's narrative for publication and promotion. 16+ students do not require parent's signature. Narrative may be used within an annual Halton History Journal supported by Halton Museums and Libraries). This contract acknowledges confidentiality of all student contact information.

Student Name: _____ Student Cell: _____
Type Name

Students Signature: _____ Student Email: _____ Age: _____

Grade/School: _____ Parent/Guardian Name: _____
Type Name

Parent/Guardian Signature _____

Parents/Guardian Cell: _____ Parents/Guardian Email: _____

HBHAS Signature _____ HBHAS Date Signed _____

Please submit completed form to HBHAScontest@gmail.com

*The HBHAS thanks you for your participation and welcomes you to our future HBHAS programs and events.
Have a great year at school.*

Halton Black History Awareness Society (HBHAS)
"Creating awareness about black history"
Exceptional People Build Exceptional Communities