

**City of Downey  
ASPIRE  
Zoom Consent**

I permit my minor child(ren), \_\_\_\_\_,  
to utilize Zoom and/or comparable online service for distance-based ASPIRE program purposes while under ASPIRE staff supervision between the hours of 3:00-5:15pm.. These platforms provide an opportunity to deliver video and chat-based educational experiences to ASPIRE participants via any electronic device.

Please be aware that Zoom and other platforms collect information about its users and has its own privacy terms and conditions to which ASPIRE participants must adhere. Please review Zoom’s privacy terms and conditions carefully before registering your child(ren): <http://zoom.us/terms> and <http://zoom.us/privacy>. A zoom link and password will be shared with me for my child(ren) to attend the distance-based ASPIRE program online, and for security and safety cannot be shared with others or the public.

In order to participate in distance-based ASPIRE program virtually, I agree to provide the following:

- A computer, mobile, or tablet device with access to the Internet; and
- A quiet space at home in which the ASPIRE participant can participate in distance-based experiences under the supervision of an adult.

To register for Zoom, I, as the parent or guardian of the ASPIRE participant(s), understand that Zoom will require certain customer data, including but not limited to: my email address and first and last name (for more information, see <https://zoom.us/privacy>).

ASPIRE will use Zoom for the following anticipated program activities:

- Group chats
- Video conferencing
- Media sharing (for example, uploading images of artwork or other projects)

I understand and agree that my child(ren) participants in the distance-based ASPIRE program online and must follow online classroom expectations: to be respectful of others, take turns talking (audio on) and using the chat feature for positive messages, and ensuring that screen sharing will be of educational material. Failure to abide by these rules may result in my child’s/children’s access to these online features to be restricted, or I may be contacted by ASPIRE staff, or my child(ren) could be restricted from future Zoom meetings.

By completing this form, I, \_\_\_\_\_, the parent or legal guardian, hereby give my permission for my child(ren), \_\_\_\_\_ to utilize Zoom and/or the comparable online service for distance-based ASPIRE program online, subject to the above-stated terms and conditions.

Signature Parent/LegalGuardian: \_\_\_\_\_ Date: \_\_\_\_\_

Minor’s Name: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_