

**DC Student Gift Incentive Affidavit**

*I confirm, declare, and affirm the following to be true as either: (1) the parent or legal guardian on behalf of the named student who is between the ages of 12 and 17 years old; or (2) the named student who is between the ages of 18 and 21.*

*The information I have provided is true and correct **for myself OR on behalf of my child:***

- 1. I have not received the first shot of a COVID-19 vaccine prior to this date.*
- 2. I am enrolled in a school in the District of Columbia, including enrollment at a District public, public charter, private, parochial, or independent school and, if 18-21 years old, am seeking a high school diploma. (This includes any student enrolled at a District Local Education Agency (LEA) but who attends a non-public placement outside the District.)*
- 3. I am a resident of the District of Columbia (which includes a student experiencing homelessness or a ward of the District who lives outside the District).*
- 4. I give this information for the purpose of receiving a gift card or merchandise from the District of Columbia government with a value ranging from \$51.00 to \$599.*
- 5. I am receiving the gift card or merchandise as a token of appreciation for taking the first shot of a COVID-19 vaccination.*
- 6. I authorize the District of Columbia government to use or otherwise disclose Protected Health Information as defined by the Health Insurance Portability and Accountability Act in connection with my/child's application and receipt of the gift card or other merchandise.*
- 7. I authorize the District of Columbia government to use my and, as applicable, my parent's/legal guardian's names and likenesses worldwide, in perpetuity, for purposes of promoting vaccination and public health, without further compensation, notification or permission unless prohibited by law, in any and all media now known or hereafter devised.*
- 8. I agree to abide by the Official Rules of District of Columbia Student Gift Incentive program. I understand there may be penalties associated with seeking to obtain additional gift cards or merchandise fraudulently or otherwise defrauding the District of Columbia government.*
- 9. I acknowledge receipt of the District of Columbia gift card or merchandise with a value ranging from \$51.00 to \$599 on behalf of myself/child as applicable.*

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_

