



CONSENT TO PHOTOGRAPH AND RECORD

Dear Parents/Guardians:

Many opportunities are presented throughout the school year to share positive stories about what is going on in our schools. Media contact could be initiated by us through a School or Board News Release that highlights a special activity or event; or, contact may be initiated by the media with respect to an educational issue or initiative for which they are seeking local information. We seek every possible opportunity to present positive stories to our community.

This **“Consent to Photograph and Record”** form is seeking your authorization for your child's recorded image, voice or work to be used by the media or in Board publications, presentations and on websites for an **indefinite length of time** as opportunities arise.

Your completion of this form is sincerely appreciated. Should you have any concerns with respect to providing this permission for your child, please contact your School Principal.

I hereby give my permission for my / my child's recorded image (whether it is still or video), voice or work to be used by the media or in Board publications, websites and presentations. I understand that I /my child may be identified by name.

▶ ☐ Yes
▶ ☐ No

STUDENT'S NAME: _____ GRADE: _____

HOME ADDRESS: _____

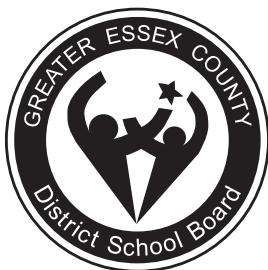
TOWN/CITY: _____ POSTAL CODE: _____

TELEPHONE: _____ DATE: _____

SCHOOL NAME: _____

TEACHER'S NAME: _____

PLEASE RETURN THIS FORM TO THE TEACHER AS SOON AS POSSIBLE



Signature of Parent/Guardian (for student under 18 years of age)

Signature of Student (for student 18 years or older)