

CONSENT FORM AND RELEASE

This form applies to students being photographed, video taped, audio taped and interviewed in connection with school activities and events.

ABC Elementary School
1234 Learning Lane
Any Town, Georgia, 00000

Principal _____

Date _____

I hereby consent to have my _____ (relation and full name) photographed, video taped, audio taped and/or interviewed by the staff at <Name of the School> or the news media on the school premises when school is in session or when my child is under the supervision of the school staff members. Additionally, I hereby give the school my consent to use creative work(s) generated and/or authored by my child on the Internet, an educational CD, or any other electronic/digital media. I understand that my child will be identified by first name only, as the author of said work.

I also consent to the school's use of my child's photograph, likeness, or voice on the Internet, an educational CD, or any other electronic/digital media. As the child's parent or legal guardian, I agree to release and hold harmless the school and the Local School District, its members, officers, volunteers and employees from and against any and all claims that shall arise out of or by reason of, or be caused by the use of my child's creative work(s), photograph, likeness, or voice on television, radio, motion pictures, the print medium, the Internet or any other electronic/digital medium.

It is further understood and I do agree that no monies or other consideration in any form, including reimbursement for any expenses incurred by me or my child, will become due to me or my child at any time because of my child's participation in any of the above activities or the above-described use of my child's creative work(s), photograph, likeness, or voice.

Child's Name _____

Address _____

Signature of Parent or Guardian

Date _____