

Photo/Video Release Form

To Whom It May Concern:

I hereby consent to have my child _____photographed, videotaped, or interviewed while at school or while participating in school functions. I consent to the use of my child's photograph or likeness in school newsletters, local newspapers, the school Web site, or other electronic/digital/print media. I also give the school my consent to use creative work generated 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 child's parent or legal guardian, I agree to release and hold harmless <Name of the school> and the Local School District. I also agree that no monies or other consideration will become due to me or my child because of my child's participation in these activities.

Child's Name: _____

School: _____Grade _____

Signature of Parent or Guardian _____

Date: _____