



STUDENT PHOTOS

Dear Parent:

During the school year there may be times when photographers are present at school functions taking pictures of the school and community events. These pictures may be printed in newspapers, in the publications of other organizations or included on the school website.

Please indicate below whether you agree to have your child's picture taken for possible distribution outside of school pictures.

It is important that you complete this form and return it to the school as soon as possible.

INDIVIDUAL CONSENT FORM

NAME: _____

GRADE: _____

<input type="checkbox"/> AGREE	<input type="checkbox"/> DISAGREE
I (we) have read the above information. My (our) child may take part in activities that may involve the photographing and distribution of pictures involving my child.	I (we) have read the above information. My (our) child may not take part in activities that may involve the photographing and distribution of pictures involving my child. If this does occur, please inform me immediately
Signature of Parent or Legal Guardian	Signature of Parent or Legal Guardian
Year Month Day	Year Month Day
**This consent is valid for the school year _____, but can be withdrawn at anytime.	**This consent is valid for the school year _____, but can be withdrawn at anytime.