

STUDENTS NAME:

MEDIA – The undersigned hereby grants permission:

•To be videotaped and televised for non-commercial use on Armada Area School District's Education Access Channel – The Educational Connection. The undersigned also acknowledges that this videotape may be used for other non-profit purposes.

•To be photographed and identified by name for non-commercial use in publications and newsletters to be published and distributed by the Armada Area School District.

•To be photographed and identified in the school setting for non-commercial use by local newspapers or television stations.

YES, I agree to all of the above with the understanding that signing this form constitutes permission for my child to be videotaped, photographed and identified throughout his/her career in the Armada Area School District. This will hold true unless I specifically revoke such permission in writing.

NO, I do not wish to have my child photographed and identified for use in any media – either school district or public.

The undersigned also hereby releases the Armada Area School District, its employees, board members, volunteers and agents from any and all claims which may now or hereafter arise out of or in connection with the publication, broadcast and/or use of my child's photograph and name in the manner described above.

Χ_

Х

SIGNATURE OF PARENT/GUARDIAN

DATE

INTERNET – The undersigned herby grants permission:

• To be identified in conjunction with an Internet World Wide Web home page of an Armada Area School District facility.

YES, I agree to have my child identified in conjunction with an internet world wide web home page of an Armada Area School District facility.

NO, I do not wish to have my child identified in conjunction with an Internet World Wide Web home page of an Armada Area School District facility.

The undersigned also hereby releases the Armada Area School District, its employees, board members, volunteers, and agents from any and all claims which may now or hereafter arise out of or in connection with the publications, broadcast and/or use of my child's photograph and name in the manner described above.

SIGNATURE OF PARENT/GUARDIAN

2017-2018