



# MEDIA PERMISSION FORM

Periodically through the school year the news media may come to school to cover special events, shoot film footage, etc. We would like parents/guardians to grant us permission for their child to be included in the film coverage. Please sign the permission below to indicate your approval or disapproval.

Thank you.

As parent/guardian of \_\_\_\_\_ I give my permission for my child's picture to  
(Child's Name)  
be taken by the news media.

\_\_\_\_\_  
Parent/Guardian Signature Date

\*\*\*\*\*

As parent/guardian of \_\_\_\_\_ I **DO NOT** give my permission for my child's  
(Child's Name)  
picture to be taken by the news media.

\_\_\_\_\_  
Parent/Guardian Signature Date

**Office Use Only**  
Room Number

3585.0020



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