

Photo Permission Form



Dear Parent or Guardian,

We are proud of our students, and we need your help to highlight their many positive accomplishments. To do this, photographs, video images and voice recordings sometimes are taken of students. These images and recordings may be distributed by the district or published in district publications, news coverage, media events, other district-approved publications and/or posted on Web sites.

I wanted to notify you of this possibility and request that you give us your permission to have your child photographed or recorded for such purposes.

Please fill out the bottom of this letter by checking the appropriate box, signing your name and dating. Then return this letter to the school office as soon as possible. If you have questions concerning this request, please contact me.

Sincerely,

Jennifer Mauch
Principal

Pleasant Ridge Montessori
School

Photo Permission Form Parent Response Section

Student Name (Please print) Pleasant Ridge Montessori _____
School Homeroom

Please check one of the following:

YES. I give my permission for my child's photograph, video image or voice recording to be taken for publishing or broadcasting in news coverage, media events and/or district-approved publications and Web sites approved by the Public Affairs Department for the 2015-16 school year. This permission for the 2015-16 school year is irrevocable. A new form must be completed for each academic year.

NO. I do not want my child photographed, videotaped or voice recorded during the 2015-16 school year.

Parent / Guardian Name - **Please Print**

Parent / Guardian **Signature**

Date