

Parent Consent for Remote Class Media Sharing

This form is to obtain your consent for sharing photos, video, or audio recordings of your child during remote classes for educational and promotional purposes.

Student Name

Parent/Guardian Name

Parent/Guardian Email

Date

Consent

- ☐ I allow my child's photos to be shared.
- ☐ I allow my child's video recordings to be shared.
- ☐ I allow my child's audio recordings to be shared.

Additional Notes or Restrictions

Parent/Guardian Signature