

# High School Senior Portrait Parental Consent Form

## Student Information

Student Name

Student ID

Grade

Date of Birth

## Parent/Guardian Information

Parent/Guardian Name

Relationship to Student

Phone Number

Email Address

## Consent

I, the undersigned, hereby give permission for my child to participate in the high school senior portrait session. I understand that the photographs may be used for school-related publications, yearbooks, and related promotional materials.

Parent/Guardian Signature

Date

Additional Comments (optional)