

# Media Release Parent/Guardian Consent Form

## Student Information

Student Name

School Name

Grade

## Parent/Guardian Information

Parent/Guardian Name

Relationship to Student

## Media Release Consent

I give permission for my child to be photographed, videotaped, or interviewed for use in media publications, including print, broadcast, online and social media for educational or promotional purposes.

☐ Yes, I give my consent.      ☐ No, I do not give my consent.

Additional Notes or Restrictions

Parent/Guardian Signature

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Date

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