

PHOTOGRAPH, VIDEO AND/OR AUDIO TAPE RELEASE

I am advised that from time to time the Iroquois Central School District, its agents or employees may take still, video or television photographs or pictures and make recordings of the voices (all hereinafter called "video or audio records") of its students and staff members, and that the "Family Educational Rights and Privacy Act" requires parental consent before said video or audio records may be released.

I hereby give permission to the Iroquois Central School District, its agents or its employees to photograph, video take and/or audio tape my child:

(Print Student Name)

and I hereby consent that such video, photography or audio tape of my child may be made or used by the Iroquois Central School District, its agents, employees or representatives in school or school-related activities, publications, school Web-site, district facebook page, or other educational purposes consistent with the purpose and mission of the Iroquois Central School District.

I further agree that the above share be made or used without compensation or payment and the said photograph, video or audio records are the property of the Iroquois Central School District. I hereby release and discharge the Iroquois Central School District and its agents, employees or representatives from any claim that may arise by reason of the making of said photograph, video or audio records or the use or publication of the same for the above purposes.

Date: _____

(Signature of Parent/Person in Parental Relationship)

This permission is granted while my child is at Iroquois Central School District unless I revoke the permission.

- I DO NOT give permission for my child to be in any video, photograph or audio recording for any reason.
- I DO NOT give permission for any child to be participate in audio/video technology such as video conferencing, audio recordings, still image creation and Web 2.0 resources such as wikis, blogs, and social media (including facebook).

Date: _____

(Signature of Parent/Person in Parental Relationship)

(Address)

Specific OPT-OUT:

I hereby give permission as outlined above for photograph, video or audio records but **choose to NOT have my child's picture used in the following:**

- Yearbooks
- Web-Site
- District Facebook Page
- District Newsletter
- Building Newsletter
- Newspaper articles
- Television

PLEASE SIGN AND RETURN THE ENTIRE FORM

www.iroquoiscsd.org