

# Woods Forest School Photo/Video Release Form

I hereby give the Woods Forest School the absolute right and permission with respect to the photography and/or video they have taken of my child or in which they may be included with others: Please initial and sign below;

\_\_\_ 1. To use the photograph and/or video on the schools website or in any of its annual reports, newsletters, brochures, public service announcements, advertisements, marketing campaigns, or other forms of literature including electronic and print publications.

\_\_\_ 2. Use the name or location where the photograph was taken or area where I live in connection with the photograph(s) and/or video.

\_\_\_ 3. Send photos and videos in a group message and/or emails to parents of the program.

Date: \_\_\_\_\_

Child's name: \_\_\_\_\_

Parent/Guardian name: \_\_\_\_\_

Parent signature \_\_\_\_\_

**OR**

**I do not release any of my childs photos or videos:**

Date: \_\_\_\_\_

Child's name: \_\_\_\_\_

Parent/Guardian name: \_\_\_\_\_

Parent signature \_\_\_\_\_