



# American Karate Do

1420 South Main St, Lindale, TX 75771

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## Student Media Consent and Release Form

*Throughout the year, students may be highlighted in efforts to promote **AMERICAN KARATE DO** activities and achievements. For example, students may be featured in materials to increase public awareness of our schools through newspapers, radio, TV, the web, DVDs, displays, brochures, and other types of media.*

I, as the parent or guardian of \_\_\_\_\_, hereby give **AMERICAN KARATE DO** and its employees, representatives, and authorized media organizations permission to print, photograph, and record my child for use in audio, video, film, or any other electronic, digital and printed media.

a. This is with the understanding that neither **AMERICAN KARATE DO** nor its representatives will reproduce said photograph, interview, or likeness for any commercial value or receive monetary gain for use of any reproduction/broadcast of said photograph or likeness. I am also fully aware that I will not receive monetary compensation for my child's participation.

b. I further release and relieve **AMERICAN KARATE DO**, its employees, and other representatives from any liabilities, known or unknown, arising out of the use of this material.

I certify that I have read the Media Consent and Release Liability statement and fully understand its terms and conditions.

I/We **DO NOT GRANT** permission for photo/image that includes this student to be published on the schools public Internet site or any other media source.

**\*\* NOTE:** For students under the age of 18, no last names will be used on any websites or social media pages.

**Please return this release form within ten (10) school days from the date of distribution. This constitute approval of the above requests.**

### Please Print

Name of child/student \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Signature of parent/guardian or student \_\_\_\_\_

Date \_\_\_\_\_ Phone Number \_\_\_\_\_