

The Westminster School at Oak Mountain
Media Release/ Web Publishing Form

Family Last Name: _____

Student Names

I hereby give The Westminster School at Oak Mountain (Westminster) the right and permission to publish the image and/or intellectual property of my child to enhance the individual or group accomplishments of my student or Westminster. Intellectual property includes, but is not limited to, photographs, audio/video productions, and other written and graphic works. I understand that such reproductions could be used to publicize/promote Westminster through the commercial print or television media and through its own media productions. I further agree that these items may be used for publication, broadcast or reproduction without limitations, or reservation or any fee.

YES NO

I further authorize the release of the above mentioned items on the Westminster website and Westminster Facebook page as indicated:

I do, do not authorize the release of my child's **first and last name** to be used on the Westminster website and Westminster Facebook page.

I do, do not authorize the release of my child's **first name and initial of last name** to be used on the Westminster website and Westminster Facebook page.

I do, do not authorize the release of my child's identifiable **individual picture**
 with, without his/her name to be used on the Westminster website and Westminster Facebook page.

I do, do not authorize the release of my child's identifiable **group picture**
 with, without his/her name to be used on the Westminster website and Westminster Facebook page.

I do, do not authorize the release of my child's **intellectual property** such as art work, poetry, essays, performances, etc. to be used on the Westminster website and Westminster Facebook page.

I understand that this release will be valid unless I cancel or amend it in writing through the school office.

Parent or Guardian Signature

Date



WESTMINSTER

SCHOOL AT OAK MOUNTAIN

Dear Parents or Guardian,

Each year, the Alabama Department of Public Health (ADPH) conducts an audit of student immunization records to ensure that children enrolled in school in Alabama are protected from vaccine-preventable diseases or have a valid exemption from vaccination. Documentation of vaccination and medical exemptions is contained on the Alabama Certificate of Immunization or on an Alabama Certificate of Religious Exemption. During the course of the audit, an ADPH employee will check for appropriate vaccinations and a valid expiration date on the Certificate of Immunization or for an appropriate exemption form. If a child needs further vaccination or an updated certificate, the school will be notified at the completion of the audit. No identifying information about the child is kept by the ADPH employee.

The Family Educational Rights and Privacy Act mandates parental consent be obtained for persons not employed by this school to view the records of its students. If you **do not wish** your child's record to be evaluated by ADPH, please sign this letter in the space below and return it to the school within two weeks.

No response from you will indicate that you will allow ADPH to audit the immunization records of your child.

Thank you for your assistance.

Sincerely,

Kristen Williams
Director of Admissions and Registrar
The Westminster School at Oak Mountain

I deny access to my child's vaccination record by the Alabama Department of Public Health.

Name of Child: _____

Parent or Guardian: _____

Date: _____