

**STOCKBRIDGE VALLEY CENTRAL SCHOOL
6011 WILLIAMS ROAD, MUNNSVILLE, NY 13409**

**PERMISSION TO PHOTOGRAPH, VIDEO TAPE
AND/OR TAPE RECORD STUDENT**

There are occasions throughout the school year when the use of photographs and video recordings best describe our educational program. In order to utilize these media to the best advantage of all concerned, we are requesting your permission to photograph, video tape and/or tape record your child – with the under-standing that the use of such media will not reflect negatively upon your child.

Examples of such use would include newspaper press releases, school newsletters, the yearbook, the school website, video productions, video-conferences, learning fair displays and teacher lesson plans.

NOTE: If this form is not returned, the Stockbridge Valley Central School District will infer that the parent/guardian **grants** the District the right to use pictures and recordings of the student and/or the student's work in its publications, productions and presentations.

_____ I hereby grant Stockbridge Valley Central School permission to record
(Student's Name) _____'s
likeness, name and/or voice for use by television, film, radio and printed media
sanctioned by the school to further the aims of education.

_____ I do not want (Student's Name) _____'s likeness,
name and voice recorded for use in the public programs of the district. While the district
will attempt to make accommodations for the participation of the student in activities that
are recorded, I understand that there are times when full participation in such activities
may not be possible.

Parent/Guardian Signature

Date