

Hoosac Valley Regional School District

49 PARK STREET

ADAMS, MA 01220

(413) 743-2939

Perseverance Respect Integrity Diversity Empathy

PHOTOGRAPH/VIDEO OPT-OUT FORM

Parents: Complete and return this form only if you **DO NOT** give permission for your student's image to appear in possible school publications, including postings on the website, in district promotional activities, or in student yearbooks.

During the course of the school year, photographs or videos of students are taken during the school day and at activities for use in district and educational news releases, publications, video productions, social media, educational projects, and the district website.

Pursuant to the Family Educational Rights and Privacy Act, (FERPA), the School District has designated photographs and videos of students as "limited directory information" that may be released and published only for the following purposes: use by the District in official publications, promotional materials, or on the District website; use in an officially sanctioned school yearbook; or use as part of a District event.

If you do NOT wish to have photographs or videos of your students released for these limited purposes, you must sign and return this form to be kept on file for one year. You will be asked to fill out a new form each school year if you do not want your child's image published.

Please Note: that if your student participates in public events (such as a sporting event or drama production that is open to the community) the school/district may have little or no control over photographs taken by media, other parents or community members attending the event. Students 18 years of age do not require parental consent for photo use.

☐ **NO, I DO NOT** give my permission for Hoosac Valley Regional School District, authorized partners or media to use photos or videos of my child for school purposes;

☐ **YES** I give permission for my child to appear in the school yearbook only

PLEASE CHECK ONE OF THE FOLLOWING:

- ☐ HOOSAC VALLEY ELEMENTARY SCHOOL
- ☐ HOOSAC VALLEY MIDDLE SCHOOL
- ☐ HOOSAC VALLEY HIGH SCHOOL

Student's Name: _____ Date: _____

Name of Parent/Guardian: (please print) _____

Signature of Parent/Guardian: _____