



Soille San Diego Hebrew Day School

MEDIA RELEASE CONSENT FORM

Student's Name (Print): _____ Grade: _____

Soille San Diego Hebrew Day School ("SSDHDS") is proud of the many accomplishments of our students and staff. Often, such accomplishments draw the attention of the media, newspapers, television stations, or other media who visit the schools to photograph, film, and/or interview students. SSDHDS requests your permission to reproduce through printed, audio, visual, and/or electronic means activities in which your student has participated in his/her education program. Your authorization will enable SSDHDS to use specially prepared materials to train teachers and/or increase public awareness and promote continuation and improvement of education programs through the use of mass media (i.e., Twitter, Facebook), displays, brochures, and/or websites, etc.

In addition, at Board meetings, SSDHDS may take candid photographs, video, and audio recordings and your student may have his/her photograph, name, audio recording and/or video image included in a publication (i.e., Board Minutes, Board Briefs) or website.

Parents or guardians may opt-out of having their students' photograph or video recording used in SSDHDS materials including newsletters, brochures, websites and video used on the Internet or in other venues by completing this form. If you opt-out, SSDHDS will also request news media not interview your student or film/photograph your student. While the local news media typically honors such requests, SSDHDS does not have the legal authority to prevent your student from talking with media before or after school or dictating who media outlets film or photograph. You are encouraged to have a discussion with your student about your wishes should the media wish to interview them.

Students, parents and visitors should be aware that SSDHDS does not have the legal authority to prevent your student from being photographed or filmed by news media or other parties at public events such as athletic competitions or student performances.

I GIVE PERMISSION for the Soille San Diego Hebrew Day School, SSDHDS, to use my child's photo, video, word or school work in school/SSDHDS publications/websites or in school/SSDHDS-issued publicity.

I DO NOT GIVE PERMISSION for Soille San Diego Hebrew Day School, SSDHDS, to use my child's photo, video, word or school work in school/SSDHDS publications/websites or in school/SSDHDS-issued publicity.

This form must be filed with the school each school year and remains valid through the end of the school year. Additionally, I agree that I shall have no right, title, or interest in these published images or recordings, nor shall I find cause for action or injuries reported from them. I understand that I will not receive monetary compensation for any publication herein authorized.

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____ Date: _____