CCS Publication/Video/Photo Release Opt Out Form

This Form is to be completed and submitted to the student's teacher if the Parent/Guardian desires that the Caswell County School System **NOT** use, publish, etc. a video or photograph that includes an image of his/her child. A separate form must be completed for each child attending the School System.

PLEASE TAKE NOTICE: Unless this Form is completed and submitted by a child's parent or guardian, then the Caswell County School System shall be expressly authorized and entitled, without limitation, to use and publish the image of a child attending the Caswell County Schools for internal and external promotional and informational purposes, and for school related activities of every kind in websites, newsletters, flyers, instructional videos, and other school related materials of every kind.

CASWELL COUNTY SCHOOLS IS NOT TO USE OR PUBLISH A VIDEO DEPICTING, OR PHOTOGRAPHIC IMAGE OF, MY CHILD

The undersigned does hereby acknowledge and affirm that he/she is the parent or legal guardian of the child/student named below, and in order to protect the privacy of my child, I do hereby expressly state that the Caswell County School System is **NOT** to use or publish a video depicting, or photographic image of, my child for internal or external promotional and informational purposes, or for school related activities of any kind in any websites, newsletters, flyers, instructional videos, or other school related materials.

This the	day of	, 2	0	
Child's/Stude	ent's Printed Full Name S	chool Child/Stude	nt Attends	
Parent or Leg	gal Guardian's Signature			
Parent or Leg	gal Guardian's Printed Fu	ll Name		
Parent or Leg	gal Guardian's Signature			
Parent or Leg	gal Guardian's Printed Fu	ll Name		