

MARK D. NEIGHBORS
SUPERINTENDENT
KENNETH BURTON
ASST. SUPERINTENDENT
BRENDA L. RICKETT
ASST. SUPERINTENDENT
BARBARA CUTRIGHT
CHIEF FINANCIAL OFFICER



BOARD OF EDUCATION
O.D. ALSOBROOK, III
CHAIRMAN
ROBERT T. MEADOWS, III
JOE N. PINKARD
PATSY BOYD PARKER
KATY PARRENT LEONARD

MEDIA RELEASE PERMISSION

Student _____ Grade _____

School _____

I, the undersigned, hereby give the Opelika City Schools the right and permission to publish/use photographs, video footage and/or audiotapes of my child in materials produced by the Opelika City Schools including but not limited to brochures, newsletters, presentations, newspaper and magazine ads, posters, other printed materials and the school website(s).

I understand that such reproductions could be used to publicize and/or promote the school district through its own media productions or through the commercial media.

I waive any right to inspect and/or approve the finished product and I release the Opelika City Schools from any liability by virtue of distortion by processing. I further agree that these items may be used for publication, broadcast or reproduction without limitation, reservation, or any fee.

In addition, I accept responsibility, knowing that this release form is on file, to have it removed when and if I deem it disadvantageous or inadvisable to have my child featured in such a manner.

YES NO

Parent/Legal Guardian Signature _____

Print Name _____

Relationship to Child _____ Date _____

Revised 1/23/09