

BOARD OF EDUCATION J. KEVIN ROYAL, M.D. CHAIRMAN ANTIONE T. HARVIS PATSY BOYD PARKER CHARLES D. BEAMS, JR. TIPI MILLER

MEDIA RELEASE PERMISSION

Student _____ Grade ____ Homeroom Teacher _____

School

I, the undersigned, hereby give the Opelika City Schools (OCS) 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 yearbooks, brochures, newsletters, presentations, newspaper and magazine ads, posters, other printed materials, the school website(s) and/or social media sites.

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 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.

If this completed form is not signed and returned within the first 10 days of the school year, the Opelika City Schools will have permission for your child to be included in any of the above mentioned photographs, video footage and/or materials.

I give permission for my child's photograph to be included in the above materials. YES

NO I do not give permission for my child's photograph to be included in the above materials and understand that my child's photograph will **not** be included in the yearbook.

Parent/Legal Guardian Signature Print Name Relationship to Child _____ Date _____

Disclaimer: OCS is not responsible for publication of third party photographs taken during school events. Revised 7/17/2020

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