

NINNEKAH PARENT PERMISSION FORM FOR PUBLICATION OF STUDENT PHOTO / NAME

Name of Student: _____

Purpose for posting student photograph or personal information:

I hereby grant permission to Ninnekah School District to use or publicly display my child's photograph, video image on the District's Web site(s), individual Web pages, or in other official District publications without further notice. I acknowledge the District's right to crop, edit, or treat the photograph, video, or audit clip at its discretion.

Name of Student (please print)

Signature of Student

Date

Name of Parent/Guardian
(please print)

Signature of Parent/Guardian

Date



I do not grant permission to Ninnekah School District to use or publicly display my child's photograph, video image on the District's Web site(s), individual Web pages, or in other official District publications without further notice.

Name of Student (please print)

Signature of Student

Date

Name of Parent/Guardian
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Date