

Permission to Use Pictures & Recordings

Throughout the school year, students in our school may be photographed and/or recorded while participating in activities in the classroom and school-wide. The pictures/recordings may be used to promote activities happening at our school and in the district as well as promote student successes and achievements. The pictures/recordings may be used on social media such as the school and district webpages, Facebook page, and Twitter feeds associated with Giles County School System, Minor Hill School, Minor School POUNCE Partners, the local newspaper, a local business's media page, etc. By signing below, you are granting permission for your child's image and/or recording to be used during these promotions.

The full names of students will NOT be published for security purposes unless parents are notified first.

Please Select One:

_____ **YES: I give permission** for my child's picture/recording to be used

_____ **NO: I do not give permission** for my child's picture/recording to be used

Child's Name: _____

Grade Level: _____

Parent's Signature: _____

Date: _____

Permission to Use Pictures & Recordings

Throughout the school year, students in our school may be photographed and/or recorded while participating in activities in the classroom and school-wide. The pictures/recordings may be used to promote activities happening at our school and in the district as well as promote student successes and achievements. The pictures/recordings may be used on social media such as the school and district webpages, Facebook page, and Twitter feeds associated with Giles County School System, Minor Hill School, Minor Hill School POUNCE Partners, the local newspaper, a local business's media page, etc. By signing below, you are granting permission for your child's image and/or recording to be used during these promotions.

The full names of students will NOT be published for security purposes unless parents are notified first.

Please Select One:

_____ **YES: I give permission** for my child's picture/recording to be used

_____ **NO: I do not give permission** for my child's picture/recording to be used

Child's Name: _____

Grade Level: _____

Parent's Signature: _____

Date: _____