

## **OPTION TO LIMIT THE USE OF STUDENT PHOTOS**



Dear Parents and Guardians:

During the school year, there may be times when photographers are present at the school taking pictures of the school and community events. These pictures may be printed in the newspapers or in the publications of other organization, or included on the school website.

Please indicate below whether you agree or do not agree to have your child's picture taken for possible distribution outside of school pictures and the yearbook.

INDIVIDUAL CO	ONSENT FORM TO			
Name of Child				
Agree	Do Not Agree			
(we) have read the above information.  My (our) child <b>may</b> take part in activities that may involve the photographing and distribution of pictures involving my child.	I (we) have read the above information. My (our) child is <b>not</b> to take part in activities that may involve the photographing and distribution of pictures involving my child. If this does occur, please inform me immediately.			
Signature of Parent or Legal Guardian	Signature of Parent or Legal Guardian			
Yr. Mon. Day	Yr. Mon. Day			