



Southwest

Independent School District

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Parental Consent for Media

This form is a parental consent and release for the photographing, videotaping, interviewing, audiotaping and/or digital imaging/recording of any student in the SWISD. This form also allows for these images or recordings to be released for printed publications, television productions, web publications, and/or educational purpose (not limited to workshops and training) by any media agency (in-District or outside resources).

I agree/disagree to have my child, _____, at (campus name) _____ participate in any photographing, videotaping, interviewing, audio taping, and/or digital imaging/recording, by any media, in any production as a part of any school-sponsored activity. My child's appearance in any production is of his/her free will, and I, as the parent, understand that this media may be shown in the district and/or to outside sources.

My signature below serves as both an understanding of, and as an agreement with, these terms and conditions.

Student's Printed Name: _____

Parent's Printed Name: _____

Parent's Signature: _____

Date: _____