



# Opt-Out Media Release Form Sample Language

*Instructions: Please complete all sections of this Opt-Out Form and return the signed form to your child's principal by [Date] of the current school year, or within 30 days of your child's enrollment in school.*

## STUDENT PHOTOGRAPHS, VIDEOS, AND/OR SOUND RECORDINGS OPT-OUT

A parent may withhold permission to have a student photographed, videotaped, and/or audiotaped during school-sponsored activities, learning experiences, and/or media events. As the parent or guardian of the student identified above, I understand that if I opt-out, my child will not be included in pictures taken by school staff, students, or anyone outside the school, including commercial photographers and the media, nor will my child's picture be part of a school yearbook, memory book, memory video, sports team, club, or any other medium.

*Note: This does not include videotaping by security cameras in school or on school buses.*

If you do not want your child to be photographed, videotaped and/or audiotaped, check the box below and sign:

**DO NOT** allow my child to be photographed, videotaped and/or audio taped during school-sponsored activities and/or learning experiences.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_