



## ***Permission To Publish on the Internet & Publications***

### **Parent/Guardian's Consent**

I am the parent or the legal guardian of the below-named student and approve the consent to the use of photograph, first name, and/or student work to be included on the School Web Site, School Facebook page and/or Publications. I affirm that I have the legal right to issue such consent.

***I give Saint Charles School the right to use my child's first name, last name, student work, group photograph (with name or no name), individual student photograph (name or no name) for inclusion on the Internet and/or Publication as checked below.***

**Student's Name: (Please Print)** \_\_\_\_\_ **Gr** \_\_\_\_\_ **Rm** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, and Zip Code:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Parent/Guardian Name: (Please Print)** \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Administrator's Signature:** \_\_\_\_\_

**Student's Signature:** \_\_\_\_\_

***I do NOT want the following used on the Internet***

*(including but not limited to School web page and Facebook page)*

*(Please check all appropriate lines)*

- \_\_\_\_\_ First name
- \_\_\_\_\_ Last Name
- \_\_\_\_\_ Student work
- \_\_\_\_\_ Group photograph (no names)
- \_\_\_\_\_ Group photograph (with names)
- \_\_\_\_\_ Individual student photograph (no name)
- \_\_\_\_\_ Individual student photograph (with name)

***I do NOT want the following used in Publications***

*(including but not limited to local newspapers)*

*(Please check all appropriate lines)*

- \_\_\_\_\_ First name
- \_\_\_\_\_ Last name
- \_\_\_\_\_ Student work
- \_\_\_\_\_ Group photograph (no names)
- \_\_\_\_\_ Group photograph (with names)
- \_\_\_\_\_ Individual student photograph (no name)
- \_\_\_\_\_ Individual student photograph (with name)

Parent/Guardian Signature: \_\_\_\_\_

Student's Signature: \_\_\_\_\_

***Please return this form to your child's homeroom teacher by Friday, August 28, 2015.***

