



Lakeview Public Schools

20300 STATLER, ST. CLAIR SHORES, MICHIGAN 48081
(586) 445-4000 FAX: (586) 445-4029

Media Release Permission Slip

Recording of various school and classroom activities through the use of photography, audio, and video equipment is done by Lakeview Public Schools throughout the year. The recording might circulate to other students or classrooms, be used in district publications, on the **district website/internet**, or be shown on local TV access cable.



If parents/guardians or students 18 years old or older approve of the use of photography, audio, or video transmission of your child/themselves, please fill in this form and **return it within five (5) days of receipt, to your school principal.**

For further information, you may contact Debbie DePape at (586) 445-4000, Ext. 2501.

Lakeview Public Schools — Release PERMISSION 2006/2007

You may **use a picture** of my child **without identifying by name.**

You may use a **picture** of my child **using a first name only.**

You may use a **picture** of my child **including my child's first/last name.**

I **do not** wish to have my child photographed or video recorded during the 2006/2007 school year.

IMPORTANT — IF YOU CHECKED ONE OF THE FIRST THREE (3) STATEMENTS ABOVE, YOU MUST ALSO CHECK ONE OF THE STATEMENTS LISTED BELOW.

I understand I am giving my **permission** for the district to use the **information referenced in the above checked statements** in all district publications, **INCLUDING use on the district website** and/or the **internet and TV access cable.**

I understand I am giving my **permission** for the district to use the **information referenced in the above checked statements** in all district publications, **EXCLUDING use on the district website** and/or the **internet and TV access cable.**

Child's name

School attending:

Grade:

Signature of parent/guardian

Date