



Photo/Name Release Agreement

As the Legal Parent(s) and/or Guardian(s) of: _____

I DO grant the following permission for the above student:

who is enrolled in the Wayne Public School District, permission is granted to the Wayne Township Public School District and its Board members, employees, agents, servants and representatives to use this student's name and/or photographic likeness, alone or in a group, in any Wayne Township Public School District publication or to release said photographic likeness to any newspapers or magazines for publicity and/or recognition purposes.

Additionally, I extend this permission to use this student's photo/image and personally identifiable information, alone or in a group on the official website of the Wayne Township Public School District or a website available through the official website or during a televised school event or public Board meeting. The official website is owned and maintained by the District as a service to the parents, students and residents of Wayne and can be accessed and viewed at www.wayneschools.com. Personally identifiable information may include the student's name, grade, photos or images (still or video).

I release the Wayne Township Public School District, its Board members, employees, agents, servants, representatives and all organizations and individuals related to the Wayne Township Board of Education's Internet Network from any and all liabilities or damages that result from the use of this student's name and/or photographic likeness on the official website of the Wayne Township Public School District or a website available through the official website or on a social media platform available through the official website, use in any Wayne Township Public School District publication or release of this student's name and/or photographic likeness to any newspapers or magazines for publicity and/or recognition purposes.

If you, as the parent or guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter to the Principal of the student's school and such rescission will take effect upon receipt by the school.

I DO NOT grant permission to use the above student's photo/image and personally identifiable information as further outlined above.

Name of Parent/Guardian (print) _____

Signature of Parent/Guardian _____

Student's School/Grade/Teacher _____

Date _____