



Chicago Public Schools Media Consent Form and Release

Consent/Release

I hereby consent to have my student photographed, video taped, audio taped and/or interviewed by the Board or the news media when school is in session or when my child is under the supervision of the Board. I understand that during the school year, the Board might like to celebrate my child's accomplishments and work. Therefore, I further consent to allow the Board to release my student's name, academic/non-academic awards, and information concerning my child's participation in school-sponsored activities, organizations and athletics.

I also consent to the Board's use of my student's name, photograph or likeness, voice or creative work(s) on the Internet or on a CD or any other electronic/digital media or print media.

As the child's parent or legal guardian, I agree to release and hold harmless the Board, its members, trustees, agents, officers, contractors, volunteers and employees from and against any and all claims, demands, actions, complaints, suits or other forms of liability that shall arise out of or by reason of, or be caused by the use of my child's name, photograph or likeness, voice or creative work(s), on television, radio or motion pictures, or on the Internet, or on a CD, or any other electronic/digital media or print media.

It is further understood and I do agree that no monies or other consideration in any form, including reimbursement for any expenses incurred by me or my child, will become due to me, my child, our heirs, agents, or assigns at any time because of my child's participation in any of the above activities or the above-described use of my child's name, photograph or likeness, voice or creative work(s).

I understand that I may cancel this release by providing written notice to the principal. I also understand that this release is valid for one school year, including the following summer.

Instructions: Check Box #1 or Box #2

1. I consent as outlined in the above consent/release section.
2. I DO NOT consent to my child being photographed, video taped, audio taped and/or interviewed by the Board or the news media when school is in session or when my child is under the supervision of the Board. Furthermore, I do not consent for the Board to release my student's name, academic/non-academic awards, and information concerning my child's participation in school-sponsored activities, organizations and athletics. I do not consent for the Board to use my student's name, photograph or likeness, voice or creative work(s) on the Internet or on a CD or any other electronic/digital media or print media.

Signature of Parent/Guardian/Student if age 18 or older

Printed Name of Parent/Guardian/Student if age 18 or older

Student's Name

Student ID #

Date

School

I understand that I have the right to inspect and copy my student's records, challenge the contents of such records; and limit my consent to the designated records or designated portions of information within the records.