PERMISSION SLIP for Student Picture and/or Project to be used by Eagle County School District

Student Name _____Parents'Name(s)_____
Teacher's Name_____School_____

Instructions: Please read carefully and check either the YES or NO boxes below.

As the parent or guardian of this student, I understand that the Eagle County School District Re50J will use my student's picture or project keeping his/her safety and best interests in mind. The goal of this service is to provide the public with access to District information via promotion of resource sharing, collaboration, and communication. I also understand that my child's projects and pictures could be viewed by anyone with access to district communications or advertisements in which the item may be used. I further understand that projects and pictures may be copied. To my knowledge, the projects and pictures requested are free from any copyright or trademark issues. The use of projects and pictures will adhere to any guidelines provided in District policy related to the use student's images and their work. These include ethical and legal use of the picture or project.

I hereby give permission to:

1. Publish my child's projects in District communications and/or District advertisements.
   - ☐ Yes
   - ☐ No
2. Publish my child's picture in District communications and/or District advertisements.
   - ☐ Yes
   - ☐ No
3. Publish my child's first name and last initial with the picture or project.
   - ☐ Yes
   - ☐ No
4. Allow a District staff member to show my child's picture or projects at conferences, workshops and other educational functions.
   - ☐ Yes
   - ☐ No

We hereby authorize the District to use, distribute, and license for use on the District's website, such photographs, film, images, digital depictions, and other recordings, including unrestricted use for non-commercial educational purposes and for District/school publicity; and in conjunction therewith to use the names, pictures, likenesses, and other information regarding the student in various school-related publications, websites, activities and programs.

Parent or Guardian (please print): _____

Signature: _____ Date: ___/ ___/ ___