

## Media / Image-Voice / Video Release for Students

The Tulare County Office of Education is proud of the many accomplishments of its students and staff. Often, such accomplishments draw the attention of newspapers, television stations, or other media who visit our schools and/or student events to photograph, videotape, and/or interview students and staff during various activities. In addition, we often use pictures of our students in Tulare County Office of Education publications and/or broadcasts, and on our Internet website. For our protection and that of your child's privacy, we must know if you want your child to be photographed, videotaped, or interviewed by the news media or for Tulare County Office of Education publications and/or broadcasts.

## Media Release

I give permission for my child to be photographed, videotaped, or interviewed by members of the media. I also give permission for the Tulare County Office of Education to use my child's photograph or words in its publications and/or broadcasts. I understand this media release does not apply to classroom displays or school yearbooks.

## Voice/Image Release

I hereby expressly grant to the production members mentioned above and to their employees, agents and assigns, the right to photograph my child and use his/her picture, silhouette or other reproduction of physical likeness or voice in, and in connection with, the Slick Rock Student Film Festival, theatrically, on television or in any motion picture(s). I also grant the right for any of these audio or video likenesses of my child to be used in the advertising, exploiting and/or publicizing of any motion picture, but not limited to television or theatrical motion pictures. I understand that the productions being created may appear in theaters, on television, and/or on the internet.

## Video Release

The student named below hereby grants the Tulare County Superintendent of Schools, the Tulare County Board of Education, the Tulare County Office of Education, and their employees, officers, agents, nominees, designees and successors, full authorization and the absolute right and permission, to assign, convey, video tape or publish any of the student's work submitted to the Tulare County Office of Education as a part of the Slick Rock Student Film Festival. The content of the student's work may or may not include his or her name. This authorization includes, but is not limited to, publishing the student's work on the Internet, which is accessible to anyone in the world. In certain film categories, student videos may be used for advertising purposes outside the realm of the Tulare County Office of Education.

If you **AGREE** to have your child's image or words used by the news media or by Tulare County Office of Education for its various publications and/or broadcasts (some or all of which could also be posted on the Internet), please complete and return this form and email it to <a href="mailto:slickrock@tcoe.org">slickrock@tcoe.org</a> or fax it to (559) 739-0315.

If you have any questions, please contact: Tulare County Office of Education - (559) 737-6350

I hereby waive any right that I may have to inspect or approve the finished product or the use to which it may be applied. In giving this authorization, I am agreeing to waive any rights I may have to maintain the confidentiality of such information pursuant to law, or to assert any privilege to do so.

I hereby release, discharge and agree to hold harmless the Tulare County Superintendent of Schools, the Tulare County Board of Education, the Tulare County Office of Education and their employees, officers, agents, nominees, designees, successors or others for whom they are acting, from any liability of any nature or description by virtue of any use whatsoever, whether intentional or otherwise, or from any change that may occur or be produced in the reproduction of the student's original work.

Student's Name (Print):	Signature:
School:	Advisor Name:
Fil	ms Submitted applicable to this release:
•	ge, the parent or legal guardian of the student must sign below.
foregoing on his/her behalf. In giving	this authorization, I am agreeing to waive any rights I may have to information pursuant to law, or to assert any privilege to do so.
Parent/Guardian Print Name	Signature
 Date	