



Volusia County Schools  
**Public Release Form – Parent Authorization**

Valid for the 20 \_\_\_\_ - 20 \_\_\_\_ School Year

School: \_\_\_\_\_ Student ID: \_\_\_\_\_

Student Name (please print): \_\_\_\_\_

Throughout the school year, your child may be photographed, interviewed, videotaped and/or sound recorded by school district personnel and/or news reporters or other members of the media. These photographs, interviews, videotapes and/or sound recordings may be viewable by the public and/or within the school district through a variety of media, including, but not limited to, websites, television, radio and print. By signing this form, you are authorizing all the above actions. Please also be aware that where a student activity, function, or event is open to the public, and your child is participating, photographs, interviews, videotapes and/or sound recordings may occur without a public release being signed.

In addition, throughout the school year, your child may participate in and/ or create a variety of products or work, including, but not limited to, art, literature, video recordings, sound recordings, photographs and/or computer programs, hereinafter referred to as “student work.” By signing this form, you authorize the School District to publicize your child’s “student work” in various ways, including but not limited to publications, collections, exhibits and displays, and other media productions.

It is also recognized that once the photograph, interview, videotape and/or sound recording of the student, and/or the “student work” (hereinafter all collectively referred to as “student image/work”) is released to the public, the School District cannot control how what has been publicized may be used or represented by others. By signing this Public Release, you hereby release the School Board of Volusia County, its members, employees, agents and representatives (hereinafter referred to as the “Board’s Releasees”) from any and all claims they may have against the Board’s Releasees due to the School District having publicized or allowed the publicizing of the “student image/work” as described in this form, and from any and all liability that may arise from publicizing the “student image/work” or allowing the “student image/work” to be publicized, as described in this form.

Should you at any time wish to revoke the authorization given by the execution of this form, you may do so by informing the school which the student attends, in writing, that you are revoking that authorization.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Parent/Guardian (please print)

After you have read and signed the permission form, please return it to your child’s school. This form will be retained at the school.