Bucks County Montessori Charter School

219 Tyburn Road, Fairless Hills PA 19030 215-428-6700 (phone) 215-428-6702 (fax)

Audio/Video/Photo/Directory Waiver Release Form

To protect the privacy and safety of Bucks County Montessori Charter School students, personal information about student (such as student home addresses, e-mail addresses and phone numbers) will not be published on any BCMCS web page or disseminated to any organizations or media outlets under any circumstances. Class directories, which include student name, address and phone number are available should you choose to have your child included. These directories are only disseminated to students within the same home room.

Student names, photos of students, audio or video recordings of students and/or student work may be published on official school newsletters or web pages, or shared with school approved news media, organizations or web services, with parent permission below.

Please note that <u>no permission is required</u> for large group photos in which the students are not individually identified.

Release

I hereby grant Buck County Montessori Charter School the right to use and reproduce any and all photographs, video clips, and/or audio clips taken of my child in conjunction with their involvement at BCMCS in any school newsletters, brochures, web sites, flyers and publications, or any outside school approved publications such as newspaper, magazines, web sites promoting the school or reporting on activities associated with the school.

I waive the right to inspect or approve the finished version(s) of such images including written copy that may be created in connection therewith.

Consent is also granted for any use of my child's name in any part of those publications listed above.

I understand that photos/audio/video used by the school for the reasons stated above, are considered the property of Bucks County Montessori Charter School and may not be sold or reused without the express consent of school officials or administration.

I understand that there is no monetary compensation for use of my child's image and that this waiver/release is good for the entire time that my child is enrolled at the school.

I have read this document and am fully aware of the consent and implications, legal, and otherwise.

(Parent/Guardian Signature)

Please print the following and confirm your consent:	
STUDENT NAME:	PARENT NAME:
This is to certify that I, as parent/guardian with legal responsibility for this student	
do consent and agree to this Release as provided above.	
do not agree to this Release as provided above	
Please include my child's information in the class directory.	

Date____/___/