



serving children
supporting families
strengthening communities

Graham Windham's

Release Form for Photography & Media Recording



I, _____ (Parent, please print your name) give permission to the Graham Windham School to take photographs, videotape, and/or digital recordings of _____ (please print Child's Name).

I also understand that the Graham Windham School is not responsible for any expense or liability incurred for _____ (please print Child's Name) as a result of participating in any photographs, videotape, and/or digital recordings taken by the Graham Windham School.

Please confirm your consent regarding your child's photography and media recording:

- I am granting the Graham Windham School permission to exhibit this work in print and electronic form for internal and external, and/or marketing purposes.
- I am granting the Graham Windham School permission to exhibit this work in print and electronic form for internal purposes only.
- I do not grant the Graham Windham School permission to exhibit this work in print and electronic form for internal and external, and/or marketing purposes.

Parent Name (Print): _____

Child Name (Print): _____

Parent Signature: _____

Date: _____