

PHOTO & VIDEO RELEASE FORM

I hereby release all right, title, or interest in and to all or any part of my photos and/or videos to the Virtual Learning Academy Charter School and declare that they may be used without any restriction whatsoever and may be copyrighted and published by the said party or entities designated by said party.

NAME OF PERSON IN PHOTO or VIDEO (print):
SIGNATURE:
ADDRESS:
 DATE:
If the PERSON IN PHOTO or VIDEO is under 18, parent or guardian must sign below:
NAME PARENT/GUARDIAN (print)
SIGNATURE:
RELATIONSHIP TO PERSON IN PHOTO/VIDEO:
ADDRESS:
DATE:

_____VLACS may publish my student's first name only, school name (if applicable), and town of residence.

_____VLACS may publish the photo and/or video, but not include my student's first name, school name or town of residence.