

PHOTO RELEASE FORM

I hereby grant to Our Savior Evangelical Lutheran School and its legal representatives and assigns, the irrevocable and unrestricted right to use and publish photographs, videotape, and/or digital images of my child, or in which my child may be included, for editorial, trade, advertising, and any other purpose and in any manner or medium; to alter the same without restriction; and to copyright the same. I further agree that my child's name and identity may be revealed in descriptive text or commentary in connection with the image (s). I hereby release Photographer and their representatives and assigns from all claims and liability relating to said photographs, videotape, and digital images.

I, the parent or legal guardian of the person named below, do hereby consent to the foregoing.

Name of student(s): _____

Signature of parent/guardian: _____

Please PRINT the following information:

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

- I DO NOT** give my consent to have photographs of my son/daughter used by Our Savior Lutheran School in any way, as specified above, other than in the school yearbook and class composite photos.
- I DO** give my consent to have photographs of my son/daughter used by Our Savior Lutheran School in any way **without their name being published**, as specified above, other than in the school yearbook and class composite photos. Note: Typical uses of photography are documentation of school activities such as the Fun Run, field trips, spirit week, PTL events, etc. These pictures are often group photos and activity shots and generally used on Sycamore, the PTL page or bulletin board, or otherwise informal ways, with no names published.

VACATION PROCEDURES

When students are absent from school, they miss valuable instructional time that cannot be recreated. Please reference new vacation policy in the School Handbook.

I understand that I must inform the teacher in writing at least one week before a vacation absence. If the absence is longer than three school days in duration, I understand that I must compensate the teacher for any re-teaching that cannot be completed during the school day. I understand that if the scheduled absence exceeds five school days, I must apply to the school board in writing at least one month in advance.

Signature of Parent: _____ Date: _____