



Photo/Video Consent

Imagine School at Lakewood Ranch 2020-2021

Student Name: _____ Grade _____

I, _____, the parent/guardian of the student above, on behalf of my child,

_____ **Do Consent** _____ **Do Not Consent**
to the Photographing/Videotaping of my child while he/she is involved in any school programs and/or activities during the present school year. I also consent/do not consent to the release of my child's name, both verbally and print, when used in connection with said Photograph/Videotape. It is understood the Photograph(s)/Videotape(s) and the name of my child may be used for promotional purposes inside and/or outside of the Manatee County School District.

_____ **Do Consent** _____ **Do Not Consent**
to the use of above mentioned Photograph(s)/Videotape(s) and the name of my child for promotional purposes on the **Internet**.

****With the Imagine Innovative Model (online model) taking place LIVE this upcoming school year, please know that your child will be in school with students that will also be present on the online platform from home. These will be recorded but will only be used for educational purposes on the teacher's online platform for the purpose of supporting the academics of the Imagine Innovative Model.***

I do hereby release and waive any and all claims, demands, or objections against the said school and school district connection with or arising out of the said Photograph/Videotape of my child. I understand that the school or school district will not duplicate Photograph(s)/Videotape(s) for the use of benefit of any individual student or parent. It is also understood that failure to return this permission slip to the school will constitute parent/guardian consent for the purposes described above.

Parent/Guardian Signature

Date

Print Name: _____