

Hampton Elementary School

Media Release Form

2021-2022 School Year

I hereby give my consent to all photographs, audio recording, academic work, and/or video recordings taken of my minor child or me by Hampton Elementary School staff or their designee. I understand that any such photographs, audio recordings, academic work, and or video recordings become the property of the local school or district and may be used by the school, district, or others with their consent, for educational, instructional, or promotional purposes determined by the district in broadcast and electronic media formats now existing or in the future created.

Please check one of the options.

_____ Yes, I give my consent.

_____ No, I do not give my consent.

Student Name (Please print.) _____

Parent Name (Please print.) _____

Parent/Guardian Signature _____

Date _____

Mailing Address _____

Telephone number _____

Email Address _____