



Media Release

I give permission for Arizona Autism Charter Schools, Inc. (AZACS) staff to record, film, photograph, interview, and/or publicly exhibit, display, distribute or publish my child’s name, appearance and spoken words during the school year, whether undertaken by school staff, students, or anyone outside the school, including the media. Public exhibit may include use in school videos, website, and social media. I agree that the school may use, or allow others to use, those works without limitation or compensation. I release AZACS staff and Board of Directors from any claims arising out of my child’s appearance or participation in these works.

STUDENT NAME

I **DO** give consent for my child’s photo/video to be used for any media purposes.

YES NO

I **DO** give consent for my child’s photo to be used for use in the classroom for learning activities.

YES NO

Name of Parent/Guardian (please print)



Signature of Parent/Guardian

Date