**Teacher/Principal of the Year – Student Consent Form Videotape/Film/Audio/Photograph/Recording Consent Form**



**Fill out the appropriate information in the blanks provided**

**STUDENT NAME**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I (name of adult) have the authority to grant and as evidenced by my signature below, do hereby expressly grant any and all permission(s) that may be necessary, needed, or desired to allow the image and voice of my minor child or children’s to appear in photographs/videotapes/audiotapes that may be published by State of Louisiana Department of Education, or in video and/or audio format, and/or hard copy

publications, and/or on its Web site (<http://www.louisianabelieves.com/>). I understand that any such appearance does not and will not constitute any type of “employment” or “agency.” I further understand that there will be no compensation for any such appearance or any future usage of any intellectual property containing the voice or image of my child or children.

I also understand that the copyright of which will be held by the Louisiana Department of Education. This copyright includes any and all rights to include the work in present and in any future publications of the State of Louisiana Department of Education, in any format or media, and to grant permission for its use in outside publications.

I also agree to allow any other media or news organization in attendance at \_

\_ to interview or photograph (still, videotape, film) my minor

child or children’s and myself for use in news broadcasts or publications.

As such, I relieve and hereby agree to hold the Louisiana Department of Education free and harmless from any and all liability arising out of the interview or photography session and subsequent publication or broadcast. I understand that any interviews or photographs that may capture the image or voice of my minor child or children’s will therefore be done with my full consent to the news organization referenced above and so assume full responsibility.

Signatures:

\_ (Signature of Parent or Guardian)

\_ (Print Name of Parent or Guardian)

\_ (Date)

