

**GOODMAN-ARMSTRONG CREEK SCHOOL DISTRICT FORM
FOR
PHOTOGRAPHING AND VIDEOTAPING STUDENTS**

Dear Parent/Guardian,

We photograph students and their accomplishments for presentations in newsletters, school newspapers, yearbooks or web pages. Occasionally the media, either television or newspaper, will feature activities of individual students or groups of students who have excelled at a particular activity. Along with the story, they will want to videotape or photograph the student(s).

We obviously encourage this; however, we are also sensitive to the fact that for safety reasons unique to an individual family it may not be wise for pictures of a student to appear in any media. If you desire, we will do our best to ensure that your student is not showcased and named in the media.

If you do NOT want your child's picture to be displayed in the media, please fill out, sign and return the form for Photographing and Videotaping Students to the office. If you have more than one child enrolled in school, use a separate form for each child and send it directly to the school office.

Please inform your child of your desire so that he/she can assist us in fulfilling your request. Be aware however, that if a student is involved in "high profile" extracurricular activities such as interscholastic athletics, it will not be possible to keep him/her from being photographed or videotaped. Also, because the school and the school grounds are relatively public places, we cannot guarantee that your child's face will never appear as part of an incidental crowd picture.

See attached form

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Fill out this form only if you do NOT want your child's picture to appear in any of the media

Parent Name _____

Student Name _____

Street Address _____

City _____ State _____ Zip _____

Telephone: Home _____ Work _____

As the parent or legal guardian, I do not wish the picture of the above named student to appear in the media; I therefore request that the school take reasonable precautions to prevent it. I understand that it is my responsibility to inform my child of my wishes in this regard and to request that he/she assist school authorities in meeting those wishes.

Signature of Parent/Guardian _____ Date _____

Please return this form to your homeroom teacher or to the high school office. This condition will be in effect at the school until revoked in writing by the parent or guardian.