



Peoria Unified School District

Every Student, Every Day, Prepared to Shape Tomorrow

PHOTO & VIDEO RELEASE FORM

Student Name:	Parent/Guardian Name:
Student Address:	
Phone Number:	City, State, Zip Code:

Background: During the school year students may be photographed, recorded or filmed by Peoria Unified School District staff or other approved individuals, including the news media, while participating in school programs and activities. Students may also create schoolwork and/or other intellectual property, such as artwork, essays, and poetry ("creative work") as part of the educational process.

Purpose: The purpose of this Photo and Video Release Form is to identify those families who do not consent to give the Peoria Unified School District permission and authority to use and/or publish you and/or your child's name, image, and/or creative works to further the district's educational mission. The district is asking that all parents/guardians sign and return this form. **If you do not sign or return this form, the district will assume you are granting permission to participate in pictures, videos or other promotional opportunities.**

Consent and Release:

The district may use, release, and/or publicize my and/or my child's name, image (in any form), and creative work through any medium whatsoever, including, but not limited to, the internet, written publication, and broadcast for any educational, editorial, promotional, business or other purpose without prior notice or compensation. The district may exercise its rights as it deems appropriate for its productions, for advertising, and for other purposes. By signing below, I intend for the district to rely upon this Release; and

I agree to release, not to sue, and to indemnify and hold the district harmless for, from and against any and all injuries, claims, demands, damages, actions, causes of action, suits or judgments of any kind or nature whatsoever (including attorneys' fees and other costs in the defense of any such claim or suit) brought by myself or on behalf of myself or my child as a result of any claim, loss, damage, or injury to any persons or property arising out of or in any way relating to any action, inaction, or participation in any video or photographic production of the district.

☐ I **do** consent to the above. ☐ I **do not** consent to the above.

☐ I **do not** consent to the above, however, I do grant permission for my child's photograph to be included in the school yearbook.

Student Signature (if over 18)

Date

Parent/Guardian Name (Please print)

Parent/Guardian Signature

Date

(Required for all students under 18)