

Parents may withhold permission to have their student photographed and/or videotaped during school-day classroom activities, learning experiences, and/or media events. **Please complete and return this form ONLY if you do NOT wish for Mounds View Public Schools to publish your student's appearance, image or name on any recorded medium.** This Publish Opt Out Release is applicable and valid for up to 12 months from the date of signature.

I, the undersigned, **do not** wish Mounds View Public Schools to record my student's appearance, image or name on any recorded medium including, but not limited to video and images for use in any form (including, but not limited to print, websites, video, etc.). I understand that Mounds View Public Schools will make reasonable efforts to comply with my request. If I become aware of a recording with my student's likeness, I will notify Mounds View Public Schools. I understand that Mounds View Public Schools will then make reasonable efforts to remove my student's likeness from recordings.

Student Name (please print): \_\_\_\_\_

Telephone #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_

As the parent or guardian, I understand that if I opt out, my child will not be included in any District marketing materials, website stories, social media mentions and/or school/District newsletters.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name (please print): \_\_\_\_\_

*Note: This exclusion does not include the school yearbook, club activity photos, photos/video captured at public events, videotaping by security cameras in school or on school buses. Please contact the school principal if additional exclusions are necessary. If this form is not signed and submitted to the school, it is assumed that your student's image can be published (print and/or electronic).*