

Photo Release Form

Dear Parents/Guardians:

During the course of the school year there are times when pictures or videos of your child may be taken, or when he or she may be interviewed while at school, to showcase an event or to detail a project of his or her grade. These pictures, videos, and interviews may be displayed in the school, shown during a school event, or may appear on our school web site or the Confluence Project* web site.

Please complete the form below and return it to your child's teacher. We appreciate your cooperation.

Sincerely,

_____ I give my permission for my child to be photographed or videotaped **without any personal identifiers** for all school purposes, including the web sites.

_____ I give my permission for my child to be photographed and videotaped with name published for all school purposes, including the web sites.

_____ I do not give my permission for any photographs, videotapes, or interviews of my child to be published or used for any purpose.

Child's Name: _____

Parent Signature: _____

Date: _____

* Our school has received a funding grant from the Confluence Project to learn about the traditional arts and history of the area of Celilo Falls.

<http://www.confluenceproject.org/education/>