

MEDIA RELEASE

FOR RICHARDS MIDDLE SCHOOL BAND STUDENTS

I hereby give my consent to all photographs, audio recordings, and / or video recordings taken of me or my minor child by Gwinnett County Public School staff or their designee. I understand that any such photographs, audio recordings, and / or video recordings become the property of the local school or district and may be used by the school, district, or others with their consent, for educational, instructional, or promotional purposes determined by the district in broadcast and media formats now existing or in the future created. I understand photographs, audio recordings, and / or video recordings may be placed on the Richards Middle School band website. Under no circumstance will a child be directly identified with a picture.

Student's Name _____
(please print)

Parent's/Guardian's Name _____
(please print)

Parent's/Guardian's Signature _____

Mailing Address _____

Telephone _____