

PHOTOGRAPHS: PERMISSION OR EXCLUSION

STUDENT FULL NAME		TODAY'S DATE
First	_Middle Initial	Last
CURRENT GRADE	ANTIC	CIPATED YEAR OF GRADUATION
> PARENT(S)/GUARDIAN(S) (Must be signed if applicant is under 18 years of age):		
		nt above, I understand that pictures are taken of students year and may be uploaded to the school website.
Parent/Guardian Circle O	ne Below (either 'gi	ve' or 'expressly withhold'):
_	_	hild's <u>photo</u> , to be <u>published on District Web pages (the</u> ated articles, either individually or as <u>part of a "team" or</u>
• •	or released to the me	nission for my child's <u>photo</u> , to be <u>published on District</u> dia for school related articles, either individually or as
PARENT(S)/GUARDIAN(S) NAME (Please P	Print)
PARENT(S)/GUARDIAN(S) SIGNATURE	
DATE	CONTA	CT PHONE
Office Use:		
Student's WBRC ID #		_