Lester C. Noecker School 100 Passaic Avenue Roseland, New Jersey 07068

PHOTO PUBLICITY PERMISSION FORM

Dear Parents/Guardians:

At various point during the school year, your child may be photographed for publicity purposes. Please check the box(es) and sign below to indicate which area(s) you authorize permission for the school district to use photographs of your child. As per state guidelines, at no time will personally identifiable information of a child be posted on the internet, newspaper or newsletter, including phone number, address, or age without prior written consent from parents/guardians.

If you, as the parent/guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter and a revised Photo Publicity Permission Form to the principal. Such rescission will take effect upon receipt by the school. *Please note: A returned form is REQUIRED for EACH child. Thank you.*

Please check the appropriate box (es) below to grant or refuse permission for each option:

I GRANT permission for the Roseland School District to use my child's photograph and/or name for schoolrelated photo opportunities in: School Newspapers or H.S.A. Newsletters School Website School Facebook page/Social media postings District or Teacher Web Pages П Local Print Newspapers (i.e., The Progress, Star Ledger) П Online Newspapers (i.e., The Alternative Press of West Essex, The Progress) П All of the Above I DO NOT grant permission for the Roseland School District to use photos of my child at any time in: Any school or local print or online publications, newsletters, or district web pages Child'Name (Print) ______Grade/HR Teacher_____ Parent/Guardian Name (Print): Parent/Guardian Signature: _____