



STUDENT MEDIA RELEASE CONSENT FORM

I, _____, hereby agree and give my permission for Bloor West Nursery School (BWNS) including its employees, volunteers, agents or representative to record, film, photograph, audiotape or videotape my child's name, image, student work and performance (hereinafter collectively referred to as "Works") and to display, publish or distribute these Works for the purpose of publishing, posting on the BWNS website and/or our Facebook page, posting in schools, and/or for broadcasting on television or radio as determined by the Bloor West Nursery School. Their photo will also be used in classroom decorations and the monthly newsletters (sent to the BWNS parents).

I hereby waive any right to approve the use of these Works now or in the future, whether the use is known or unknown to me, and I waive any right to any royalties related to the use of these Works.

I understand that the Works may appear in electronic form on the internet or in other publications outside of Bloor West Nursery School's control. I agree that I will not hold BWNS responsible for any harm that may arise from such unauthorized reproduction.

Please mark in this space if you **AGREE** that your child may participate in recorded BWNS events and BWNS hosted events as described above.

Please mark in this space if you **AGREE** to include your child's name, image, student work and performance **ONLY** in the classroom decorations and the monthly newsletters (sent to the BWNS parents).

Please mark in this space if you **DO NOT WISH** to have your child participate in recorded BWNS events and BWNS hosted events, classroom decorations and the monthly newsletter as well as other works described above.

I acknowledge that I have read this Student Media Release Consent Form and I fully understand the contents and meaning of this release. I understand that I am free to contact Laura Grimaldi (Supervisor and Head RECE Teacher) or Stephanie Martin (President) with any questions regarding this release.

Student's Name

Parent/Guardian Name

Parent Guardian Signature

Date

Bloor West Nursery School

School

Parent/Guardian Name

Parent/Guardian Signature

Date