

## Permission to Publish



By signing, I **agree** to **all** of the criteria below applying to my child:

- my / my child's photo
- my / my child's art work
- my / my child's written work
- recordings of me / my child's voice or instrument playing
- video of me / my child

to be used by Greenhithe School as follows:

- in annual class photos
- on a poster
- in a printed document
- on the school website
- on a class communications page e.g. Seesaw
- in promotional material for the school
- in a school newsletter
- in videos of productions or other performances
- in a newspaper article or television programme about the school
- in student-made videos about the school
- in media designed for professional learning

Student name:

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Room number: \_\_\_\_\_

Student signature:

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Date:

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Parent/Caregiver name:

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Signature:

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Date:

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**Tick one box only:**

☐ I **do** give Permission to Publish as stated above.

☐ I **do not give** Permission to Publish as stated above.

**\*This agreement will remain in force as long as your child is enrolled at this school. If you wish to change your permissions in the future, please visit the school office to complete a new form. Thank you.**