**Consent for Publication of Student’s Photographs and Videos**

From time to time, photographs or videos of students are taken in school or at places where the students are involved in an excursion or activity. These materials are used to promote curricular, co-curricular and student life activities at school and within the community.

These photographs or videos may be used in class activities and/or published by the [INSERT NAME OF SCHOOL] in documents, school magazines, newsletters, displays, journals, professional development materials for teachers, on the website or social media platforms (e.g. Facebook, Instagram, YouTube) of the school and marketing materials produced by or for [INSERT NAME OF SCHOOL].

We seek your consent via this form before including your child in any such publication or internal/external display. In most circumstances, photographs or videos will include limited personal information regarding the student’s identity. However, unless otherwise directed by you, it is usual for a student’s full name to appear under photographs or to record student achievement in various activities in the school newsletter or school magazine, because of the limited circulation of these documents.

## This permission is ongoing unless you withdraw it in writing.

**NOTE: Please confirm your consent to the uses described below by ticking the relevant box. If you do not want your child's name to be used please delete "and name".**

**I GIVE PERMISSION FOR:**

Photographs or videos which my child may be involved, to be published in (please tick):

|  |  |  |
| --- | --- | --- |
| * YES
 | * NO
 | **Publications:** (e.g. magazines, newsletters, presentations) published by [INSERT NAME OF SCHOOL] – with name  |
| * YES
 | * NO
 | **Websites/Intranets:** published [INSERT NAME OF SCHOOL]– with name |
| * YES
 | * NO
 | **Social media platforms:** (e.g. Facebook, Instagram, YouTube) published by [INSERT NAME OF SCHOOL]– with name |
| * YES
 | * NO
 | **On the [Educational body’s] website and publications:** including the [Educational Body’s] newsletters and brochures – with name |

## and I acknowledge and I agree that

I can withdraw any consent provided above at any time by giving written notice to [INSERT NAME OF SCHOOL], and it is my responsibility to notify the school if I wish to withdraw any consent provided above. Once consent is withdrawn, [INSERT NAME OF SCHOOL] will not make any new publications that include the student’s photograph(s) or video(s). [INSERT NAME OF SCHOOL] will take reasonable steps to remove the student’s photograph(s) or video(s) from current publications, however this may not be possible or practical in some situations.

|  |  |  |
| --- | --- | --- |
| (please tick) | * YES
 | * NO
 |

|  |
| --- |
| **Student’s Name**  |
| **Year of enrolment at [INSERT NAME OF SCHOOL]** | **Year level on enrolment at [INSERT NAME OF SCHOOL]** |
| **Parent/Caregiver Name** | **Signature** | **Date** |
| **Student Name (If student is aged 15+)** | **Signature (of student aged 15+)** | **Date** |