



Georgia Academy for the Blind

2895 Vineville Avenue ■ Macon, Georgia 31204

Hendricks Building ■ 478-751-6085 (School) ■ 478-752-1745 (Fax)
Administration Building ■ 478-751-6084 (Office) ■ 478-751-6659 (Fax)

www.gabmacon.org

Dr. Cindy Gibson, Superintendent

Media Consent Form

Students who attend a state school are occasionally asked to be part of school or program publicity, publications, and/or public relations activities. In order to guarantee student privacy and ensure your agreement for your student to participate, the school asks that you sign this form and return it.

The form referenced below indicates approval for the student's name, picture, art, written work, voice, verbal statements, or portraits (video or still) to appear in school publicity or general publicity, videos, or on the school's website. For example, pictures and articles about school activities may appear in local newspapers, district publications, and on Facebook. These pictures and articles may or may not personally identify the student. The district may use the pictures and/ or videos in subsequent years.

AGREEMENT

Student and Parent/ Guardian release to state schools the student's name, picture, art, written work, voice, verbal statements, portraits (video or still) shall only be used for public relations, public information, school or district promotion, publicity, and instruction.

Student and Parent/ Guardian understand and agree that:

- No monetary consideration shall be paid;
- Consent and release have been given without coercion or duress;
- This agreement is binding upon heirs and/or future legal representatives;
- The photo, video, or student statements may be used in subsequent years.

If the Student and Parent/ Guardian wish to rescind this agreement they may do so at any time with written notice. Otherwise, this permission remains in effect while the student continues to be enrolled at GAB.

Effective Date of Agreement _____

Student's Name: _____ (Print Name)

Student Signature (if at least 18 years old): _____

Parent/ Guardian: _____ (Print Name)

Parent/ Guardian: _____ (Signature)