MEDIA RELEASE PERMISSION FORM

This form will remain current until a Parent/Guardian contacts the Office to make changes, in which case a new form will have to be completed.

FULL NAME OF STUDENT: ____________________________________________

FULL NAME OF PARENT/GUARDIAN: __________________________________

SIGNATURE OR PARENT/GUARDIAN: ____________________________________

DATE: ____________________________________________________________

PLEASE INDICATE YOUR PREFERENCE BY TICKING THE APPROPRIATE BOX:

☐ I GIVE PERMISSION FOR MY STUDENT TO APPEAR IN MEDIA RELEASES

PLEASE READ THE FOLLOWING:

➢ I hereby authorise Education Queensland and/or its agents to make use of:
  • Pictures of my student
  • My student’s name in print
  • My student’s original materials - e.g. samples of schoolwork, drawings
➢ I acknowledge the school publishes the newsletter to the school website and my student’s full name may be published in the newsletter.
➢ I acknowledge that my student and I are not entitled to remuneration or royalties in respect of our involvement of any project that was produced in whole or in part by us.
➢ I acknowledge that my student and I have no claims to copyright in any aspect or portion of the project and that copyright in any project shall vest in Education Queensland.
➢ I agree that the material may be used in all formats and media, as representations, reproductions or adaptations either complete or in part, alone or in conjunction with any wording or drawing.

OR

☐ I DO NOT WISH MY STUDENT TO APPEAR IN ANY MEDIA RELEASES

NB: By ticking ‘NO” your student will not be included in any school media opportunities including the annual school magazine.