

Ascension

After School

Photo Release Form

Please initial below, the options that you have chosen and sign and date the bottom of the page.

_____ I hereby grant Ascension's teachers and staff permission to publish photographs of my child in school publications and/or on the school website and social media sites including, but not limited to Facebook, Twitter and Instagram and Ascension App.

By signing below, I acknowledge my understanding of the above and hereby give permission to Ascension to use any and all photographs taken of my son/daughter for use in school publications and/or postings to the agency website and social media sites. I hereby waive any rights or interests that I might have in any or all such images.

OR

_____ I decline to have my child's photo displayed on social media sites including the school website, Ascension App, Facebook, Twitter and Instagram.

Child's Name

Parent/Guardian's Printed Name

Parent/Guardian's Signature

Date