**MEDIA CONSENT FORM**

**School Year: 2012/13**

I hereby consent to the use of any photographs/video tape taken of my child by Exploration Station The Preschool at Miami Dade College or the media for the purpose of advertising or publicizing events, activities, facilities and programs of Exploration Station The Preschool at Miami Dade College in newspapers, newsletters, website, other publications, television, radio and other communications and advertising media.

By law, Exploration Station The Preschool at Miami Dade College protects the privacy of the students and is prohibited from releasing students’ personal information. Any student and/or their school work will be identified by first name only; no last names will be mentioned.

From time to time representatives of the news media are invited to the campus to cover events at our school. When this happens, there is a possibility your child/children may be photographed, videotaped, or interviewed for a news story.

**Please mark any of the choices below and return this form back to the school.**

\_\_\_\_\_\_\_Yes, I give permission to photograph, videotape, or audio record my child and for local

news media to photograph and/or interview my child. I also give permission to display

my child’s school work and photographs including class pictures at the Preschool’s/ my child’s classroom’s website.

\_\_\_\_\_\_\_Please **do not** publish my child’s photograph or school work on Exploration Station The Preschool at Miami Dade College website or any other Internet page for which the photo may be

requested.

\_\_\_\_\_\_\_ I **do not** give permission for my child’s photograph or school work to be used for ANY

school publication, news media usage or Internet website, or for the news media to

photograph and/or interview my child.

**Please Print**

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Parent Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_