



## Student Consent Form Photograph, Video, Web, Art, Copy or Interview

I authorize the Allentown School District and the Foundation for Allentown City Schools to release to each other content such as photographs, copy, interviews, artwork and video/audio tapes of me (an ASD student age 18 or over) or my child (an ASD student under age 18):

\_\_\_\_\_  
Name of Student – Please Print

\_\_\_\_\_  
ASD School/Grade

\_\_\_\_\_  
ASD Teacher/Principal

and I give the Allentown School District and Foundation for Allentown City Schools the right and permission to publish/use such content at will. I understand that such reproductions could be used to publicize/promote the Allentown School District and Foundation for Allentown City Schools through its own media productions or commercial media outlets.

I waive any right to inspect and/or approve the finished product and release the Allentown School District and Foundation for Allentown City Schools from any liability by virtue of distortion by processing.

I accept responsibility, knowing that this release form is on file, to withdraw my permission by notifying the school in writing if necessary. I understand that this consent shall remain in effect until revoked by me in writing, but that any such revocation shall not affect disclosures previously made by the Allentown School District and the Foundation for Allentown City Schools prior to the receipt of any such written revocation.

I, on behalf of myself, my spouse/significant other, and my child, discharge and agree to hold harmless the Allentown School District, Foundation for Allentown City Schools, its agents, and employees from any liability by virtue of the use of the authentic creative materials produced by and/or photographs/video/audio of myself or of my child.

\_\_\_\_\_  
Print name of parent/guardian or  
student (only if age 18 or older)

\_\_\_\_\_  
Signature of parent/guardian or  
Signature of student (only if age 18 or older)

\_\_\_\_\_  
Date