



Lambton Kent
District School Board
Student Achievement *Community Success*

IMAGE OR AUDIO RECORDING
**SPECIAL EVENT STUDENT RELEASE
FORM**

(In accordance with the Municipal Freedom of Information and Protection of Privacy Act, Part II)

I hereby give do not give consent for _____ to take part in
(Name of Student)

_____ with the understanding that media
representatives (newspapers, magazines, and radio or television stations) may be present at the event
and may wish to interview, photograph or videotape your child .

I further understand that the image or audio recording will remain the property of Lambton Kent District
School Board, and that these may be made available to other educators, educational institutions, public
service organizations and public media organizations.

Date: _____

Signature of Parent/ Guardian: _____
or Adult Student