



# MEDIA RELEASE FORM

For \_\_\_\_\_  
Student name (please print):

Schools often receive last-minute requests from reporters to feature school activities in news stories. In addition, the Department of Education likes to feature Yukon students in photos, videos and on Department of Education websites. Approval of parent/guardians, or the students themselves if they are at least 19 years old, is required for the Department or third parties such as news reporters to use these images. Consent is **optional** and pertains only to events organized by the Department of Education, including schools, regardless of whether the event takes place on or outside school grounds.

I \_\_\_\_\_ (print parent/guardian name), legal parent or guardian  
of \_\_\_\_\_ (print student name), give consent

OR

- I, the above named student, am over 19 years of age and give consent

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- to the Department of Education
- and/or third parties including, but not limited to, community news organizations

to use images(s) or video(s) of the student named above (from now on referred to as "images") for the purpose of promotion, exhibition or any other appropriate, lawful purposes including training and educational programming. By signing this optional release, I waive the right to inspect or approve the images or publication(s), such as written material(s), in which the image appears.

I agree that the copyright in the image that has been taken in the above mentioned way remains with the photographer or the organization the photographer works for. I hereby waive any claims I may have based on the usage of the image or work derived from it. Specifically, I acknowledge that there is no consideration or expectation of any remuneration for the use of the image.

This release form shall be considered in effect for the entire school year following the date of signature. If a parent or student wants to withdraw this consent at any time, please notify school office staff. I agree that this release shall be binding, have read this release and am fully familiar with its contents.

ALTERNATELY:

I do NOT give permission for use of images by the Department or third parties for ANY purposes

Signed:

\_\_\_\_\_  
Parent/Guardian (Signature)

\_\_\_\_\_  
If over 19 years old: Student (Signature)

\_\_\_\_\_  
Date

Your personal information is being collected under the authority of the Education Act and s.29(c) of the Access to Information and Protection of Privacy Act (ATIPP) and will be managed in accordance with the ATIPP Act. For more information about the collection, use and disclosure of your personal information, please contact the Department of Education's ATIPP Coordinator at (867) 667-8326.