



## MEDIA CONSENT FORM

I, \_\_\_\_\_ grant permission to Wesley College Preparatory School (WCPS), to use my child's \_\_\_\_\_ image (photograph and/or video) for use in Media publications for the school including:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Videos                     | <input type="checkbox"/> Email Blasts         | <input type="checkbox"/> Recruiting Brochures |
| <input type="checkbox"/> Websites and/or Affiliates | <input type="checkbox"/> General Publications | <input type="checkbox"/> Newsletters          |
| <input type="checkbox"/> Magazines                  | <input type="checkbox"/> Yearbooks            | <input type="checkbox"/> Flyers               |

Please initial the paragraph below which is applicable to your present situation:

\_\_\_\_\_ I am the parent or legal guardian of the above-named child. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release.

\_\_\_\_\_ I am 20 years of age or older and I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning and impact of this release.

Signature of Student: \_\_\_\_\_

Date: \_\_\_\_\_

Name of Student: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

*(must sign if child is under 20 years of age)*