**SCHOOL**

**SCHOOL YEAR**

Date: ………………….

**Subject: Parent/Guardian Written Consent Form for the Publication of Photographs and Videos of their Child/Children**

Dear parents,

We would like to inform you that in the context of various activities of the school, printed and/or electronic material is published which may include photographic material and/or videos with students of the school (e.g. class/school newspaper, school website, information leaflets, etc.).

For ethical reasons, your written consent is required to the publish your child's/children's photographs and/or videos.

Please complete accordingly the following.

I declare that **I** accept the publication of photographs and/or videos of my child/children in printed and/or electronic material published by the school.

I declare that **I do not accept** the publication of photographs and/or videos of my child/children in printed and/or electronic material published by the school.

Name(s) of child/children: 1. …………………………………….Class: ……………….

2. ……………………………………. Class: ……………….

3. ……………………………………. Class: ……………….

4. ……………………………………. Class: ……………….

Signature of parent/guardian: ……………………………………………………………….

Full name of parent/guardian: ……………………………………………………… ...