

# PERMISSION FORM

## Work and Image Release Form

Dear Parent/Guardian,

Staff at Lebanon Borough School may want to photograph your child for use in the school's print and electronic communication platforms. Pictures may be of groups of students or individuals, and the students' names will not be used without individual permission from the guardian. This will remain in effect during your child's time at LBS. If you wish to change your choice in the future contact the office.

**Please complete the section below and return to the school office.**

*Thank you for your cooperation in helping us showcase our students' achievements.*

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### **Please check one:**

- I give permission for my child to be photographed and to possibly feature my child's work (e.g. art, essay, etc.) in school print or electronic communication.
- I **do not** want my child photographed and do not want his or her work used in school print or electronic communication.

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Student Name

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Current Classroom Teacher/Grade

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Parent/Guardian Signature

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Today's Date

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# Lebanon Borough School District

6 Maple Street  
Lebanon, New Jersey 08833

Telephone: (908) 236-2448 Facsimile: (908) 236-7670

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*Bruce Arcurio*  
*Chief School Administrator*

## **PHOTOGRAPHY/NEWS MEDIA PERMISSION FORM**

\_\_\_\_\_ I give permission for my child's picture and name to be published.

\_\_\_\_\_ I do not wish to have my child's picture or name published.

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Current Grade

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

\*Please note that this permission will remain in effect during the child's time at LBS. If you wish to change your choice in the future contact the office.