

Sparta Township Public Schools
Parental/Guardian Publicity Consent Form

(Revised August 2006)

Student's Name: (please print) _____ Student's Grade: _____

Student's School _____

Print name of Parent/Guardian: _____ Relation to Student: _____

Date: _____ Parent/Guardian phone number (day) _____ (eve) _____

CHECK ONE

<p><input type="checkbox"/> Yes</p> <p>I grant permission to use my child's full name and/or photograph in newspapers, on the Internet and at public presentations (Board of Ed meetings, district displays at conferences, interviews, etc.)</p>	<p><input type="checkbox"/> No</p> <p>I DO NOT grant permission to use my child's full name and/or photograph in newspapers, on the Internet or at public presentations (Board of Ed meetings, district displays at conferences, interviews, etc.)</p>
--	---

Signature of Parent/Guardian: (sign) _____

This information will become part of your child's school records and will supersede all other Publicity Consent Forms. Your choices will remain in effect for the duration of your child's enrollment in the Sparta Township Public Schools. If you, as the parent or guardian, decide to rescind this agreement, you may do so at any time by sending a letter to the Principal of your child's school.