

Media Release Form
2018-2019

(Please print)

Date: _____

Student Name _____

Grade _____ Homeroom _____

I hereby grant permission to the New Haven Public Schools, (Betsy Ross Arts Magnet School), to use my child's picture, likeness, name, photograph or voice, at its discretion in publications or on video or audio tape concerning education programs or activities of the New Haven Public Schools. I have been assured, and it is my understanding that this shall be used in instructional or publicity contexts only, and shall not be used for any commercial purposes whatsoever.

With signing below I **hereby agree** to hold harmless the New Haven Public Schools in connection with any and all claims regarding my child's photographic image, including legal fees and other costs incurred; and I **hereby waive** any claim for compensation for my child's photographic image.

I have read this Release prior to signing it, and I understand its contents.

(Please print)

Parent/Guardian Signature _____

Address: _____

City, State, Zip: _____

Phone # _____ Work # _____ Cell # _____

Parent/Guardian: If you DO NOT grant permission for this media release please sign here _____

Betsy Ross Arts Magnet School



Shawn A. True, Principal
Angela Brunson, Asst. Principal

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