

Student Name _____

Grade _____

Tipton-Rosemark Academy
Personal Release

I hereby grant Tipton-Rosemark Academy permission to use my child's voice and picture, as embodied in the materials originally obtained during the duration of enrollment at TRA and related film, digital media, graphics, videotape or other audiovisual materials created during school activities for the promotion of Tipton-Rosemark Academy.

Scope of Use:

- for non-broadcast showings to private groups within TRA
- for use at conferences and events
- for use on the TRA website(s)
- for use of marketing materials

I agree that TRA has no responsibility to submit the materials produced hereunder for review or approval, and that TRA, its administrators, faculty and staff shall be without liability to me for TRA's exercise of its rights granted herein. This grant to TRA does not conflict with any of my existing commitment(s). I have the rights necessary to make this grant to TRA and nothing herein will constitute any TRA obligation to make any use of the rights granted herein.

Parent Name _____

Parent Signature _____

Address _____

Date _____

IF INFORMATION CHANGES PLEASE NOTIFY THE ADVANCEMENT OFFICE.