



1390 CAVALIER WAY  
ROEBUCK, SOUTH CAROLINA 29376

TELEPHONE (864) 576-4212  
FAX (864) 574-6265

### PUBLIC RELATIONS RELEASE

Date: \_\_\_\_\_

As a parent or legal guardian of \_\_\_\_\_, I grant permission for my student to participate in the following public relations activities: (please check all that apply)

- \_\_\_\_\_ Interview with print media
- \_\_\_\_\_ Photograph by print media
- \_\_\_\_\_ Taping for television use
- \_\_\_\_\_ Taping for school/district use
- \_\_\_\_\_ Photograph for school/district use
- \_\_\_\_\_ Use of name in school or district newsletter

I understand that this activity has been approved by school authorities and will be monitored by school officials.

Parent Signature: \_\_\_\_\_

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As a parent or legal guardian of \_\_\_\_\_, I **DO NOT** grant permission for my student to participate in any public relations activities.

Parent Signature: \_\_\_\_\_

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### WEB PUBLICATION RELEASE

As a parent or legal guardian of \_\_\_\_\_, I understand that my student's writing, artwork, or personal picture may appear on our school or district webpage. No home address, telephone number or other personal information will appear with their picture or work. If it is writing or artwork, I understand that there will be a copyright notice prohibiting the copying of such work without express written permission. In the event that anyone requests such permission, those requests will be forwarded to the parent/legal guardian.

I give my permission for the publishing as described above.

Parent/Guardian Signature: \_\_\_\_\_

Student Signature: \_\_\_\_\_

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As a parent or legal guardian of \_\_\_\_\_, I **DO NOT** grant permission for my student to have writing, artwork or personal pictures appear on the school or district webpage.

Parent Signature: \_\_\_\_\_