



## PHOTO RELEASE FORM

**Please sign and return this form to your instructor**

I am aware that photos and video of my child may be taken on the premises of the Monongalia County Technical Education Center (MTEC) campus as well as during any off-site campus extracurricular activity (occupational clubs activities, state and national school events, etc).

I am ware that photos and video may be posted to a website and/or be used in a variety of printed pieces (brochures, newsletters, flyers, print ads, television) for the purpose of illustrating, advertising and promoting the activities associated with the Monongalia County Technical Education Center (MTEC).

Student Printed Name \_\_\_\_\_

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

Class Name \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_ I have read the Photo Release Form and **agree** to allow my child to be photographed

\_\_\_\_ I have read the Photo Release Form and **do not agree** to allow my child to be photographed.

Signature, parent or guardian \_\_\_\_\_

(If under age 18)