



# STUDENT IMAGE, VIDEO OR VOICE RECORDING INCLUDING MEDIA USE Consent

## ACCESSIBILITY:

To request this file in large print, please email [aoda@wcdsb.ca](mailto:aoda@wcdsb.ca) or call (519) 578-3660.

The Waterloo Catholic District School Board (WCDSB) likes to share good news stories. From time to time, school and/or classroom activities such as student projects, achievements, activities, plays, athletics and presentations are photographed or recorded by school or board staff. Sharing these photographs and recordings is a wonderful way to celebrate and remember these activities and to highlight our good news stories. Please note:

- These recordings/photographs may be used in school and Board newsletters, and/or school/Board websites and social media including Twitter, Facebook, and YouTube. Individual students will only be photographed and identified with appropriate consents.
- When the media, such as newspapers, television and radio, are invited to the school for the purposes of reporting on newsworthy events or activities, their reports may include non-identifying photos of groups of students.
- Parents/Guardians/Students Age 18 and Over must be aware that when students participate in extra-curricular or non-compulsory activities off of school grounds, the school principal is unable to control or prevent any media exposure, which may occur.

## CONSENT

- Yes, I consent** to the use of my/my child's photo and/or video or voice recordings on school or Board websites and social media sites and/or shared with other students/families and for me/my child to be photographed or interviewed by the media as outlined above.

My consent also indicates that I waive all claims to compensation or damages based on the use of my/my child's photo and/or video or voice recordings by the Board. I also waive any right to inspect or approve the finished photo and/or video or voice recordings. I agree that all such portraits, pictures, photographs, video and audio recordings, digital files, works, and any reproductions thereof shall remain the property of the WCDSB, unless otherwise noted.

I understand that this consent is valid for one year and may be withdrawn by me at any time with written notice.

- No, I do not consent** to the use of my/my child's photo and/or video or voice recordings as outlined above.

\_\_\_\_\_  
Name of Student (please print)

\_\_\_\_\_  
School

\_\_\_\_\_  
Name of Parent/Legal Guardian (please print)

\_\_\_\_\_  
Signature of Parent/Legal Guardian OR Student Age 18 and Over

\_\_\_\_\_  
Date

If you have any questions or concerns please contact your school principal.

**To be Completed by:** Parent/Guardian OR Student Age 18 and Over

**Description of Use:** Original: Main Office (Retain: Current School Year)