



## Student Media Release Form

I, \_\_\_\_\_, do hereby grant or deny permission to Elm City Montessori School to use the image of my child, \_\_\_\_\_, as marked by my selection(s) below. Such use included the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures, newsletters, videos and digital images such as those on the Elm City Montessori School website.

1.

- I grant permission to use my child's image in the following ways:
  - Limited usage:* I allow my child's image to be used within his/her classroom only (e.g. classroom newsletter, in group photos on Transparent Classroom, etc.)
  - Limited usage:* I allow my child's image to be used within the school community only (e.g. school newsletters, fliers posted at the school for events. etc.)
  - Unrestricted usage:* I give unrestricted permission for my child's images to be used in print, video, and digital media (website, Facebook page, etc.). I agree that these images may be used by Elm City Montessori School for a variety of purposes and that these images may be used without further notification. I do understand that the child's last name will not be used in conjunction with any video or digital images.

2.

- I deny permission to use my child's image at all.

**Please be sure to choose either option 1 or 2**

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

\_\_\_\_\_  
Date

---


### Elm City Montessori School

Primary School: 375 Quinnipiac Avenue • New Haven, CT 06513

Elementary School: 495 Blake St • New Haven, CT 06515

Phone: 203.903.4031 • Fax: 203.946.6077

[www.elmcitymontessori.org](http://www.elmcitymontessori.org)

 /Elm City Montessori School