



## Nash County Public Schools: Model Release Form

NCPS employs various media for educational & promotional purposes: photos, videos, audio recordings, & written narratives of students. These may be featured on school & district websites, social media, printed/digital materials, & shared with external organizations or the media & serve as the permission until the student changes schools. This form allows guardians to grant permission for their child's image to be used. You have the option to opt-in or opt-out. Once a student is opted in or out, the selection remains in effect until graduation, unless a written notice is submitted.

### 1) Your Child's School: \*

Please CIRCLE your child's school:

Bailey Elem	Red Oak Elem	CITI High
Benvenue Elem	Spring Hope Elem	Nash Central High
Coopers Elem	Williford Early Learning	NRM Early College High
Edwards Elementary	Winstead Ave Elem	Rocky Mount High
Englewood Elem	Nash Central Middle	Southern Nash High
MB Hubbard Elem	Red Oak Middle	TAR River Academy
Middlesex Elem	Rocky Mount Middle	NEDA
Nashville Elem	Southern Nash Middle	Northern Nash High

2) Student ID Number: \* \_\_\_\_\_

3) Your Child's Name: \* \_\_\_\_\_

4) Your Child's Grade: \* Please CIRCLE which grade your child is in:

Pre-k

K	5	10
1	6	11
2	7	12
3	8	13
4	9	



**5) Option 1 - OPT-IN - YES \***

**I hereby grant Nash County Public Schools permission to capture use photographs, videos, audio, and written narratives of my child during instructional school activities throughout the school year for display, publication, or release to external organizations in print, video, and/or digital media.**

***Mark an X if you wish to Opt-IN your child.***

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**6) Option 2 - OPT-OUT - NO \***

**I hereby DENY Nash County Public Schools permission to capture use photographs, videos, audio, and written narratives of my child during instructional school activities throughout the school year for display, publication, or release to external organizations in print, video, and/or digital media.**

***Mark an X if you wish to Opt-OUT your child.***

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**7) Best Phone Number \*** \_\_\_\_\_

**8) Guardian Name \*** \_\_\_\_\_

**9) Guardian Email \*** \_\_\_\_\_

*By signing below, you acknowledge that you have read and understood the terms of this consent form. This consent covers various media types, including but not limited to photographs, videos, audio recordings, and written narratives. It pertains to school-related activities during the school year.*

**Signature \*** \_\_\_\_\_

**Date (MONTH/DAY/YEAR) & Time \*** \_\_\_\_\_

***You have read this form in full and privacy policy and give consent.***