

Nevada Joint Union High School District Student Photo Release Form



I hereby grant permission for digital photographs and/or video recordings to be taken of my student or my student's work as part of their participation in the Nevada Joint Union High School District program of study. I understand that the images collected may be used for non-profit educational purposes.

I authorize NJUHSD to use my student's image on its websites and/or in printed promotional materials without further consideration and I acknowledge NJUHSD's right to treat the acquired medeas at its discretion.

NOTE: No names of students will be identified.

I also acknowledge that NJUHSD may choose not to use my child's image at this time, but may do so at its own discretion at a later date.

I understand that when my student's image is posted on the district or school's website, the image could potentially be downloaded by a third party. I agree that I will not hold NJUHSD or NJUHSD schools responsible for any harm that may arise from such unauthorized reproduction.

Parent/Guardian Name: (Please Print) _____

Signature: _____

Date: _____

If you have any questions about the collection of images or personal information by the Nevada Joint Union High School District please contact us at 530-273-3351