

**MORENO VALLEY UNIFIED SCHOOL DISTRICT
OFFICE OF THE SUPERINTENDENT/PUBLIC INFORMATION**

RELEASE OF STUDENT COMMENTS, PHOTOS, ARTWORK AND/OR PROJECTS

Student's Name

School

Date of Birth

I hereby grant permission to Moreno Valley Unified School District to use my child's* comments, photo or video tape, artwork and/or projects at its discretion for presentations, newsletters, brochures, news releases, publicity, or on the District and/or school websites.

I agree to indemnify and hold harmless the District, its officers, employees, agents, and volunteers from any and all claims or liability arising from such use. I understand that nothing shall require the District to include my child's artwork and/or projects in any of the above mediums.

_____ Permission granted

_____ Permission withheld

Parent/Guardian's Signature

Print Name

Relationship

Phone Number

Street Address

Date

City, State, and Zip Code

*Student Signature
(18 years or older)