



AUTHORITY TO USE PHOTOGRAPHIC/VIDEO IMAGES

Dear Parent/guardian

When your child/ren enrolled at the Greater Shepparton Secondary College you elected **not to permit** the use of photographic, video, audio or any other form of electronic recording for and on behalf of the Greater Shepparton Secondary College.

We understand that your position in this regard has changed and you would like to update your consent.

Please indicate **your consent** by signing and dating this document.

Student Name: _____ Year Level _____

I _____

agree to and provide permission for the photographic, video, audio, or any other form of electronic recording of my child for and on behalf of Greater Shepparton Secondary College. This may mean inclusions in newsletters, newspaper articles, TV, or the school website.

If at any time a parent/guardian wishes to withdraw this permission, it is the responsibility of the parent/guardian, to contact the college.

I acknowledge and agree that ownership of any photographic, video, audio or any other form of electronic recording will be retained by the school. (Department of Education and Training).

I authorise the use or reproduction of any recording referred to above for any reasonable purpose within the discretion of the Department of Education and Training without acknowledgment and without being entitled to remuneration or compensation.

YES, I give permission

Signature of Parent/Guardian: _____ Date: ____ / ____ / ____