**Media Release Permission Form**

**(Please Print Form)**

**Student:**

**School:**

**Grade:**

**I hereby give “Boys to Men Life Transformational Movement” the right and permission to publish/use photographs or video and/or audio tapes of my child, a student, registered in the State of Georgia.**

**I understand that such reproductions could be used to publicize/promote the commercial media.**

**I waive any right to inspect and/or approve the finished product and do release the State of Georgia and the City of Atlanta Public Schools from any liability by virtue of distortion by processing. I further agree that these items may be used for publication, broadcast or reproduction without limitation, or reservation or any fee.**

**In addition, I accept responsibility, knowing that this release form is on file, to have it removed when and if I deem it disadvantageous or inadvisable to have my child featured in such a manner. {If you prefer your child, not be involved in these types of activities, we will respect your wishes.}**

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

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**