
Media Consent Form

Student _____

School _____

Grade _____

I hereby **consent to** the publication and other use of the following, e.g., my child's likeness, name, writing, photographs, video, art, quotes, work samples, honors, awards, etc., without limit, reservation or remuneration by the media and/or Akron Public Schools – as approved by the Akron Board of Education.

Parent/Guardian Signature _____

Date _____

Questions? Call 330.761.2930