



First State Montessori  
A c a d e m y

# Photo/Film/Interview Consent Form

From time to time, our school will receive requests from the media to publicize our educational programs and student activities. In addition, we may photograph, quote and videotape our students for use in the school newsletter, website, and other promotional or training/educational materials. We ask for your consent to allow your student(s) to participate if and when this should happen.

I hereby authorize First State Montessori Academy (FSMA) to photograph, videotape, or film my child or permit the media to photograph, videotape or interview him or her. I also authorize FSMA to use statements and/or comments about the programs, services, conditions, and personnel associated with my student's experience at FSMA.

I understand and agree that First State Montessori Academy (FSMA) and its employees will bear no responsibility for the content of any news media coverage in which such filmed interview, film, videotape, or photography may be used.

\_\_\_\_\_ I give my consent to this request

\_\_\_\_\_ I do NOT give my consent to this request

Student's Name (please print): \_\_\_\_\_

Parent/Guardian (please print): \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

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