



Photo, Press, Audio and Electronic Media Release for SKIES *Unlimited* Students

I, _____, do hereby grant or deny permission to the Fort
(Parent/Guardian's Printed Name)

Jackson Child, Youth and School Services (CYSS) SKIES *Unlimited* program to use images of my
child(ren), _____
(Child's Name)

as indicated below. Images and/or video taken of my child for use in materials that include, but may not
be limited to, printed materials such as brochures, newsletters, posters, videos and digital images such
as those posted on the SKIES *Unlimited* website (<http://fortjacksonmwr.com/skies/>).

- Deny permission to use my child's image.
- Grant permission to use my child's image in the following ways (mark all that apply):
 - Limited usage:** I want my child's image used within the CYSS setting only (not in the larger community).
 - Limited usage:** I want my child's image used for educational materials only (not marketing). This could be either within CYSS or in the larger community. (i.e. parent education classes)
 - Limited usage:** I want my child's image used on printed materials only (no digital or video use).
 - Unrestricted usage:** I give unrestricted permission for my child's image to be used in print, video and digital media. I agree that these images may be used used by CYSS for a variety of purposes without further notifying me. **I understand that my child's name will not be used in conjunction with any video or digital images.**

Parent/Guardian's Signature

Date

Please make a copy of this form for your records and the original will be forwarded to the SKIES *Unlimited* Director. If you have any questions, concerns or comments please call (803) 751-6777.