

**Charlotte-Mecklenburg Schools**  
**Standard Photographic and Student Work Release**

I, \_\_\_\_\_, parent or guardian of \_\_\_\_\_ do hereby grant to the Charlotte-Mecklenburg School System the unlimited right to use and/or reproduce photographs, likenesses or the voice of my child in any legal manner and for the internal or external promotional/informational activities of the Charlotte-Mecklenburg School System.

I also agree to allow my child to be interviewed and/or photographed by representatives of the external news media in relation to any and all coverage of the Charlotte-Mecklenburg Schools System in which they are involved.

I also agree to allow my child's work and/or photograph to be published on the Charlotte-Mecklenburg School System's Internet Web Pages.

I further understand that by signing the release, I waive any and all present, or future compensation rights to the use of the above stated material(s).

\_\_\_\_\_  
(Signature of Parent/Guardian)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Witness)

\_\_\_\_\_  
(Street Address of Parent/Guardian)

\_\_\_\_\_  
(City, State, ZIP Code)

THIS INFORMATION TO BE COMPLETED BY SCHOOL OFFICIALS ONLY:

TYPE OF MATERIAL: Photograph \_\_\_ Slide \_\_\_ Videotape \_\_\_ Other \_\_\_\_\_  
(Specify:)

USE OF MATERIAL: \_\_\_\_\_  
(Name of brochure, TV show, slide show, web pages, etc.)

YOUR NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

***Please return this form to:***

Public Information Department, Education Center, P.O.Box 30035, Charlotte, NC 28230-0035