



AUTHORIZATION FORM

Authorization to use photos, audio and video recordings or student productions

2022-2023

Student Identification

Last Name: _____

First Name: _____

As part of school or center activities (classroom presentation, recreation, outings, extracurricular activities, trips, etc.), the English Montreal School Board requires your authorization to use your child's image for information and promotion purposes and for the use, reproduction and dissemination of various productions of your child.

In this context, I agree that photos, recordings or videos of my child may be taken during the activities of the center or the class, knowing that they can be used free of charge, as the case may be, for publication or distribution according to the choices you have selected.

The authorization is valid for the current school year, but it can be revoked at any time, upon written notice.

IDENTIFICATION OF ELEMENTS AUTHORIZED AS PART OF SCHOOL OR CENTER ACTIVITIES	Please check if you agree	
	YES	NO
1. I authorize the taking of individual or collective photos of my child and its use for printed purposes or for restricted distribution in the school or center (honorable mention, students' mosaic, graduating album, center newspaper, frame digital center, etc.).	<input type="checkbox"/>	<input type="checkbox"/>
2. I authorize the taking of individual or group photos, audio or video recordings and their distribution on the following forms of media (example: television, press, radio, etc).	<input type="checkbox"/>	<input type="checkbox"/>
3. I authorize the taking of individual or group photos, audio or video recordings and their distribution on the following websites (example class, center, EMSB website, CSSDM website, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
4. I authorize the taking of individual or group photos, audio or video recordings and their distribution on the following social media (example: Facebook, Twitter, etc.)	<input type="checkbox"/>	<input type="checkbox"/>
5. I authorize the EMSB to dispose of the reproduction and distribution rights of my child's productions or services without compensation and I waive any claim against the EMSB, the school or the center (works in visual arts, written texts, music, etc. theater, concert, computer production, etc.).	<input type="checkbox"/>	<input type="checkbox"/>

In witness whereof, I have signed this document dated _____

Name of Parent/Guardian

Signature