



CLAYTON VALLEY HIGH SCHOOL

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Concord, CA 94521
(925) 682-7474
FAX (925) 825-7859



PHOTO RELEASE FORM

Dear Parent/Guardian (or Student if 18 or older):

On occasion, representatives, such as student or teachers, from Clayton Valley High School wish to photograph students in connection with school programs or events. Educating the public is one of our objectives. The entire community benefits from knowing about the needs and abilities of our students and about the programs we offer to children and families. In order to release student photos for school publications and/or post on the CVHS Web site, we need written permission. To give your consent, please complete the form below.

I, _____, parent/guardian of _____,

authorize the use and reproduction by Clayton Valley High School of photographs taken of my child, without compensation to me/my child. All of these photographs shall be the property, solely and completely, of Clayton Valley High School.

Signature of parent or guardian: _____ Date: _____

Address: _____

OR

_____ (initial) I am 18 years of age or older and I give my consent without reservations to the foregoing on my own behalf.

Signature of subject: _____ Date: _____

Address: _____

If you have additional questions, please call Dr. Sharon Brockman, Vice Principal at CVHS.