

Photo & Video Release Form – Students

Directions: Please check the boxes to indicate what type of permission you give FIA.

1. I authorize Faith International Academy (FIA) to publish my photograph, video and/or audio recording of me for use in electronic or print publications of Faith International Academy, multimedia presentations, or online publications (including Facebook and the school website).

- YES - with my name**
- YES - without using my name**
- NO**

2. I authorize FIA missionary staff to publish my photograph, video and/or audio tape of me for use in personal and/or mission-related electronic or print publications, multimedia presentations, or online publications (including Facebook or blogs).

- YES - with my name**
- YES - without using my name**
- NO**

I am 18 years of age and have the right to enter into this agreement.

Student Name(s): _____

Address: _____

Student Signature: _____

I am under 18 years of age.

Printed Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Please return this form as part of the (re)enrollment process.

(Note: Your failure to return this form during the enrollment process implies your full consent and authorization.)