PARENT AGREEMENT FORM FOR PUBLICATION OF INFORMATION ON AN ELECTRONIC COMMUNICATIONS SYSTEM

Student: _____

Grade: _____

School: **Stony Point High School**

_____ Yes _____ No **My child's work may be electronically displayed and published by the Round Rock Independent School District.**

_____ Yes _____ No **Photographs of my child may be electronically displayed and published by the Round Rock Independent School District.**

My child's name may be used in association with a photograph or published work:

Full Name _____ Yes _____ No

First Name, Last Initial Only _____ Yes _____ No

NOT AT ALL _____

I hereby give the above permission and release the Round Rock Independent School District from any liability resulting from or connected with the publication of such work and information.

Parent/Guardian Name (print) _____

Parent/Guardian (signature) _____

Date: _____