Photograph Consent Form

(To be signed by person being photographed, parent/guardian)

Please indicate your response to your child's or your photograph being taken and used in a student's Graduation Project for West Wilkes High School. All individuals under the age of 18 must have parent/guardian consent for their photograph to be taken, used, or published for academic purposes. By giving permission, you indicate consent for photographs to be used in portfolios and presentations. Some could be published in an online presentation, and pictures will be viewed by faculty, judges for Graduation Project, and other students in the school.

<u>Pleas</u>	e indicate your response with a check or an x.
	I DO NOT wish for my child's or my photo to be taken, used or published.
	I DO wish for my child's or my photo to be taken, used or published.
Full N	ame of Individual being photographed:
Full n	ame of Parent/Guardian:
Parei	nt/Guardian Signature: