



Lake Elsinore Unified School District
 Coordinator of Community and Media Relations
 Phone (951) 253-7174 | Fax (951) 253-7084

MEDIA RELEASE FORM

Student ID: _____

First Initial: _____

Last Name: _____

Student Name: _____ Grade: _____

School Name: _____

Media Coverage: Throughout the school year, the Lake Elsinore Unified School District will be subjected to coverage by local and regional media outlets. At times, these media outlets, including newspapers, television stations and radio stations, will request to speak to and photograph your child. While it is the district's policy to foster positive relations with the media and to cooperate with the media to the fullest extent possible, it is also the district's policy to protect the identity of those students whose parents or guardians request their child's name or likeness not be published in the local media.

It is important to note that the district ultimately has no control over over what media outlets publish. However, it will make every effort to respect the wishes of those parents or guardians who do not want their child included in any coverage.

District-created materials: During the school year, it also may be appropriate for the district to create and publish materials that include the names and images of your child. These materials may include newsletters, promotional brochures and the district website. While it is the district's intent to recognize students and to include them whenever possible to promote the district and its good work, it is also the district's policy to protect the identity of those students whose parents or guardians request that their child's name not be published in any format.

You may contact your student's teacher, school site administrator of the district Coordinator of Community and Media Relations at any time to discuss this release. Publications including your child or their work will be made available to you for review if requested. Further, by signing this form, you agree to hold the Lake Elsinore Unified School District, its employees or representatives harmless if your child's name or likeness is unknowingly, inadvertently or mistakenly published.

Please indicate in which format it is acceptable for child's name and/or likeness to appear:

- | | | | | |
|---|-----|--------------------------|----|--------------------------|
| Media (newspapers, television news, radio, Internet news) | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| District-created materials (brochures, newsletters) | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| School Yearbook | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| School or district Web site | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |

Please contact the school if media information changes throughout the school year

Parent/Guardian Name (print): _____

Parent/Guardian Signature (required): _____

Date: _____

***SEE OTHER SIDE OF FORM**