



Sacramento City Unified School District  
COM-F004 Photograph/Video Internet Authorization Form

Photos/videos of your child taken by \_\_\_\_\_ of \_\_\_\_\_ on \_\_\_\_\_  
(Name of photographer) (Organization) (Date)  
will be used for the following reason: \_\_\_\_\_.

Please fill out the permission slip below to allow your child's photo/video to be used as stated above.

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I give permission for photos/ video of my child, \_\_\_\_\_, to be used by the Sacramento City Unified School District for publication on the district website, [www.scusd.edu](http://www.scusd.edu), and all related SCUSD publications and Internet sites, including school and/ or club webpages.

I, the undersigned, am parent and/or legal guardian of the student noted on this document, and hereby fully release and discharge the Sacramento City Unified School District, its officers, employees, agents, servants, and volunteers from any and all liability arising out of in connection with the above described independent activity and all liabilities associated with any and all claims related to such activity that may be filed on behalf of or for the above-named minor. For the purposes of this release, 'liability' means all claims, demands, losses, causes of action, suits or judgments of any and every kind that arise as a result of the above described activity and resulting from any cause other than the district's gross negligence.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Name (printed)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Telephone Number

Please fax a copy to the Communications Office at (916) 643-9049 or send via inter-office mail to Box 704. Keep a copy of this document at your site.