

MEDIA RELEASE

I hereby assign and grant permission to Paige Dunsdon Ballet and Jazz Studio the right to take photos, motion pictures, audio or video footage of me/ my child/ren for use and publish on public media owned by Paige Dunsdon Ballet and Jazz Studio. I specifically waive any right to any compensation I may have.

These photos can include individual photos, group photos, or photos of feet, taken by Paige Dunsdon or a representative of Paige (teacher, professional photographer) for advertising, for the Paige Dunsdon Ballet and Jazz Studio, Website, Facebook and/or Instagram.

The photos will not be used for advertising anything other than the Paige Dunsdon Studio or Ballet Shop's information pertaining to discounts etc.

All photos will be taken in a respectful and tasteful manner.

IF YOU AGREE WITH THIS RELEASE, PLEASE SIGN THE BELOW GRANTING PERMISSION.

IF YOU ARE OVER 18, YOU MAY SIGN AS THE STUDENT.

Please return this form signed as soon as possible to Paige Dunsdon, or your teacher.

I DO GIVE PERMISSION

Students Name.....

Parents Name.....

Mobile Phone Number.....

Email address

I give permission as the parent or guardian of

Parents signature for Media Release.....

Students signature if over 18 years.....

I DO NOT GIVE PERMISSION FOR MY CHILDS PHOTO BE TAKEN

Students Name.....

Parents Name.....

Signature.....