

**Child and Family Consent Form**

Fill out the appropriate information in the blanks provided:

Child Name: (print name) \_\_\_\_\_

I, \_\_\_\_\_, (name of guardian) do hereby perpetually and irrevocably grant to the Louisiana State Department of Education, its officers, agents, employees, students, assigns, and licensees, [hereinafter referred to as LDE] the absolute right, permission, and license to record the likeness and/or voice of my minor child with still photography, film, videotape, digital recording or storage device and to edit such still photographs, film, videotape, or digital files at LDE's discretion, and to use, reproduce, display, and/or distribute, and/or to make derivative works from, any of them.

I do hereby waive any right to inspect or to approve the still photographs, films, and/or videotapes, digital files or presentations or the editorial or printed matter that may be used in conjunction therewith. I further waive any claim that I have or may have with respect to the eventual use to which any of the aforementioned materials are or may be applied. Such still photographs, films, and/or videotapes, or digital files may be used at LDE's sole discretion, with or without my name, alone or in conjunction with any other material of any kind or nature.

I further expressly agree that the foregoing release is intended to be as broad and inclusive as is permitted by the laws of the State of Louisiana and any applicable federal law, and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I acknowledge that I have read this document and understand its terms. I am signing the release freely and voluntarily.

Signatures:

\_\_\_\_\_ (Signature of Parent or Guardian)

\_\_\_\_\_ (Print Name of Parent or Guardian)

\_\_\_\_\_ (Date)

