



Student Photo Video Permission Form

As the parent(s) / guardian(s) of _____
Student Name

Hereby grant permission to Inkster Preparatory Academy to use photos, printed names, and video footage of our children in school publications, postings in the building, at presentations, and on the school website. I / We also grant permission for our child to be identified in an accompanying caption used with snapshots as a news item for the school.

Parent / Guardian: _____

Printed Student Name: _____

Date: _____ Phone: _____

Address: _____

Note: This form is not required for large group photos where individuals are not identified, or to have a student's name and photo printed in the school yearbook.

If you do not want to have your child(ren) to appear in the school yearbook, please notify the school in writing.

It is the policy of Inkster Preparatory Academy that no discriminatory practices based on gender, race, religion, color, age, national origin, disability, height, weight, or any other status covered by federal, state or local law be allowed in providing instructional opportunities., programs, services, job placement assistance, employment or in policies governing student conduct and attendance. Any person suspecting discriminatory practice should contact the administrative office of Inkster Preparatory Academy.