



TIMOTHY CHRISTIAN SCHOOL

MEDIA CONSENT FORM

Consent for interviews, photographs, video and/or audio recording.

This form is valid for the entire duration of my child(ren)'s enrollment at Timothy Christian School.

***For changes, please contact the school at tcsge@timothychristianschool.ca.*

I, _____ consent to the following:
Parent(s) / Guardian(s)

Please initial your approval for the items below:

_____ Photographs _____ Audio recording
_____ Video recording _____ Interview

Name(s) of child(ren)

These items listed above may be used for the purpose of:

_____ media request
_____ staff/student achievement and/or activities
_____ event promotion
_____ school promotional literature

I understand I am entitled to refuse consent. I understand that Timothy Christian School (staff, principal, teachers or board members) cannot be held responsible for final stories and/or photographs used by news media.

Signature (Parent, Guardian, Foster Parent)

Relationship to Child

Witness Signature

Date