



OAKLAND UNIFIED SCHOOL DISTRICT

**PARENTAL CONSENT AND RELEASE FORM  
PICTURES-VIDEO-RECORDINGS**

Student's Name:

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School Site/Location:

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Activity Name and Date:

(Unless specified otherwise, a signature on this form covers all events for the year. If you are giving blanket permission, you may leave this line blank.)

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I am the parent/guardian of the above named student. I have been informed by the school that my child's school has planned a school sponsored activity where my child might be photographed, video taped, filmed or recorded by District staff or a third party. I understand this activity has been approved by the District. I understand this is a valuable learning experience for my child and I agree to allow my child to participate in this activity or event as stated in this Consent and Release Form ("Form").

I authorize the Oakland Unified School District, or any third party it has approved, to record my child's name, likeness, image, voice and performance through film, photograph, pictures, videotape, digitally, or through any other process as part of the activity or event. I further agree that any recording may be edited at the sole discretion of the District, or any third party the District approves, and used in whole or in part by the District, or any third party the District approves, for any and all broadcasting, publication, distribution, training, audio/visual, or exhibition purposes in any manner or media, within or outside of the District.

I understand that I and my child shall have no intellectual property or other legal right or interest in or arising from the recording in any way, including but not limited to any royalty or other economic right or interest that could arise from any publication, broadcast, or reproduction of the recording or the activity or event.

I also agree to release and hold harmless the District from and against all actions, claims, demands, lawsuits, damages, losses, expenses and liabilities of every kind or

nature, including but not limited to reasonable attorney's fees, arising out of this activity, or arising out of or any use of the recording.

I understand this Form contains the entire agreement and understanding between the District and me and may not be amended unless mutually agreed to in writing by the District and me. I further understand that the laws of the State of California govern this form.

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I hereby consent and agree to my child's participation in the above activity or event and to the recording of my child's participation, and use of that recording, under the terms stated above.

Student Name (print name):

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Parent/Guardian Name (print name):

\_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **Contact Information**

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