



## ADMINISTRATIVE OFFICES

8353 University Boulevard • Moon Township, PA 15108 • (412) 264-9440 • Fax (412) 264-3268 • www.moonarea.net

### 2018-2019 MEDIA DECLINE FORM

During the school year, Moon Area School District (MASD) students have the opportunity to participate in programs, assemblies, activities, field trips and other events in addition to their normal classroom lessons that support their education, promote community service, encourage positive behavior or otherwise enhance their learning experience.

Students may also earn achievements and accolades throughout the year for their involvement in academic and extracurricular projects and activities. The District believes these experiences are an integral part of a student's educational journey and, in many cases, enrich his or her academic journey. The District would like to share information about these experiences with the community.

The District asks that you permit your child's name, image, audio or writing to be used in District publications, District video productions, and on its digital/electronic media offerings, when relevant, to spread good news about what is happening with your child and in Moon Area schools. We also ask you to permit your child's name, image, audio or writing to be released for use by area newspapers, radio, television stations and/or other external organizations to help share your child's MASD experience with the larger community.

As always, the utmost priority of MASD is to protect the safety of all students. The intent of the Media Decline Form is to preserve the safety of students and families who may be at risk by the publishing of names and photographs.

Parents/guardians should understand that at events open to the public, such as concerts, athletic events, etc., their child's photograph may be taken and published by the District and any other media in attendance.

By checking the box below, I recognize that any photographs, video and/or audio recordings of my child, and schoolwork created by my child, to promote my child, school and District through its own media productions, yearbook or through the external media will not be published. I also know, in addition to the above, that my child will not be able to participate in group photos meant to be published or receive public acknowledgement for their scholastic or extra-curricular efforts.

**NO, I do not grant permission**

In addition, I accept responsibility to notify the school district and building, in writing, should my decision change.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Student Name \_\_\_\_\_ (please print) Grade \_\_\_\_\_

\*\*PLEASE NOTE THAT THIS MEDIA DECLINE FORM MUST BE FILLED OUT EACH SCHOOL YEAR IN ORDER TO BE VALID.