



Midland Community School

Midland Middle/High School
PO Box 109 109 W Green Street
Wyoming, IA 52362

Midland Elementary
510 3rd Ave N
Oxford Junction, IA 52323

Phone 319-259-5340
FAX: 563-488-2253

STUDENT OPT-OUT FORM

Please sign and return the attached form only if you DO NOT want your child to be photographed or filmed for use in print, television, film, District website, social media or other internet publications.

Dear Parent/Guardian,

Midland School District likes to celebrate the achievements of our students and staff. Throughout the year photos and videos may be taken of students, student work and school activities. These photos and videos may appear in various Midland news stories and materials, including district website, social media websites, newsletters, yearbooks, brochures, local newspapers, etc. Student names are usually not used in association with photos and videos, but when they are, only first names will be used except in situations where full names are standard (such as athletic programs, yearbooks, etc).

There are times when our school may be featured in various media. News reports, photographers and/or film crews from TV, radio stations, newspapers or magazines may wish to photograph and/or film your child in relation to a story about our schools or students. Your child's name and grade may be included in the report. Classrooms might also participate in video-conferencing on the internet.

Our schools are also visited by community organizations or partners who are providing services to students. These organizations or partners may wish to photograph your child and may want to use the photograph and/or your child's name and the name of the school in their publications and informational materials.

We will make every effort to honor your request, however, please be aware that there may be circumstances when your child may be photographed or filmed beyond our control. Please discuss your wishes with your child so that he/she knows if you do not want your child to be photographed or filmed.

PLEASE SIGN AND RETURN TO YOUR CHILD'S SCHOOL OFFICE *only if you do not want your child to be photographed or filmed.*

- IDO NOT** want my child to be photographed or filmed by members of the media, organizations or agencies at school, for use in print or internet publications, documentaries, films or video, to the extent that the school can prevent such contact.

Child's Name _____

Print Name of Parent/Guardian _____

Parent/Guardian Signature _____

Date _____ Telephone Number _____