

**SHARON ARNOLD LUX SCHOOL OF DANCE  
MEDIA RELEASE FORM**

We will be posting pictures of students this year on our website. If you would like to allow your child's photo to appear on our website, please print out and sign this form below. Thank you.



I, the undersigned, do hereby consent and agree that the Sharon Arnold Lux School of Dance, or its agents have the right to take photographs, videotape, or digital recordings of my child or myself beginning on **September 9, 2024**, and to use these in any and all media, now and hereafter known.

I do hereby release to Sharon Arnold Lux School of Dance, and its agents all rights to exhibit this work in print and electronic form publicly or privately and to use its form for marketing. I waive any rights, claims, or interest I may have to control the use of my, or my child's identity or likeness in whatever media used. I understand that my, or my child's name will be kept private and not be released in any written form. I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback. I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement.

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_

Cell Phone #: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_

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