

VBS Media Opt-out Form

Please do **NOT** use my child's photograph and/or video. Those images and video are **NOT** to be reproduced or released for use in media including, but not limited to, brochures, videos, website, social media, etc

* If, at any time, you would like to change your information, please stop by the office.

| Student's Name: (please print) | |
|-----------------------------------|--------|
| Class # and Color: | Grade: |
| Parent/Guardian: (please print) | |
| Parent/Guardian Signature: (sign) | |
| Date: | |



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