

BRCMS DRAMA CLUB MEDIA RELEASE FORM

Parents: By signing this form, you are giving consent for your child's name and image to be printed and/or posted in PBSO publications, PBSO websites, and BRCMS drama club websites/publications.

Student ID# _____

Student Name

School Name Boca Raton Community Middle School

School Contact Mr. Joshua R Tay

Parent/Guardian Name

By signing below, I give permission for the school and drama program to use my child's photograph, video image, writing, voice, and name in PBSO and drama club related media.

PARENT SIGNATURE

DATE _____

DIRECTOR SIGNATURE
