

Dr. Dana KriznarSuperintendent

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Student Media Release

DCPS Productions or outside organization, including news media

l,	, hereby authorize the	
videotaping/filming/pho	tography of my child,	
and/or the release of his	/her name and achievement(s) for publishing (pr	rint,
World Wide Web) and/o	r broadcasting purposes. I also consent to the sh	owing
of the video/film/photog	graphs to any person. I understand that the Duva	ıl
County School District is 1	not a party to outside organizations'	
photography/filming/vid	eo production and will hold Duval County Public	
Schools and its employed	es harmless from any liability in connection with c	t
production not produce	d internally by Duval County Public Schools.	
_	Signature	
_	Print Name	
	Date	