



Engaging Minds

Autism Services

614 East Boulevard
Kokomo, IN 46902
(765) 461-1245

Parent Release Form for Media Recording

I, the undersigned, do hereby grant or deny permission to Engaging Minds Autism Services to use the image of my child, _____, as marked by my selection(s) below. Such use includes the display, distribution, publication, transmission, or otherwise use of photographs, images, and/or video taken of my child for use in materials that include, but may not be limited to, printed materials such as brochures and newsletters, videos, and digital images such as those on the Engaging Minds Autism Services website. I authorize the use of these images without compensation to me. All negatives, prints, digital reproductions shall be the property of Engaging Minds Autism Services.

Engaging Minds Autism Services will not release any personally identifiable information without prior written consent from you as parent or guardian.

I understand that if I, as the parent or guardian, wish to rescind this agreement, I may do so at any time in writing by sending notice to the address listed above and such rescission will take effect upon receipt by Engaging Minds Autism Services.

- Deny permission to use my child's image at all.
- Grant permission to use my child's image in the following ways (mark all that apply):
 - Limited usage: I want my child's image used within the Engaging Minds Autism Services setting only (not in the larger community).
 - Limited usage: I want my child's image used for educational materials only (not marketing). This could be either within Engaging Minds Autism Services or in the larger community. One example of this could be videos in parent education classes.
 - Limited usage: I want my child's image used on printed materials only (no digital or video use).
 - Unrestricted usage: I give unrestricted permission for my child's image to be used in print, video, and digital media. I agree that these images may be used by Engaging Minds Autism Services for a variety of purposes and that these images may be used without further notifying me. I do understand that the child's last name will not be used in conjunction with any video or digital images.

Parent/Guardian
signature _____

Date _____

