

**NY State Association of Family and Consumer Science Educators  
Hudson Valley Northeast Region**



**Permission to Publish**

**Student Release Form**

Dear Parent/Guardian:

Students will have their photos taken as part of the Awards Banquet. Photos may be posted on the NYSAFCSE and/or your child's school website. Please complete ONE of the sections below and return with your dinner reservation confirmation by Monday, March 23, 2020.

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Please complete & sign below, **indicating you give permission** to publish your child's picture.

My signature below indicates **I give permission to publish my child's photo** on NYSAFCSE and / or school websites.

Student's Name (*Please Print*): \_\_\_\_\_

School (*Please Print*): \_\_\_\_\_

Parent/Guardian's Name (*Please Print*): \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

\*\*\*\*\*

Please complete & sign below, **indicating you DO NOT give permission** to publish your child's photo.

My signature below indicates **I DO NOT give permission to publish my child's photo** on NYSAFCSE and / or school websites.

Student's Name (*Please Print*): \_\_\_\_\_

School (*Please Print*): \_\_\_\_\_

Parent/Guardian's Name (*Please Print*): \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_