



CONFIDENTIAL

Student Name: _____

School: _____

School Year: _____

Revised 4-Jul-2023 - District Accountability – Records & Information Management

Student Media Release and Photographs - Consent Form (Parent/Guardian)

The Upper Canada District School Board (UCDSB) endeavors to be as inclusive as possible while respecting the individual confidentiality of students and their parent(s)/guardian(s). The UCDSB collects, retains, and uses your child's likeness and personal information in a variety of ways in accordance with the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c. M56 and the Education Act R.S.O.1990, c.E.2.

The UCDSB and individual schools are pleased to share live-streaming of some UCDSB sporting and other events for viewing students, parents, guardians, and the larger public on the UCDSB YouTube channel.

Please indicate your consent (Yes) or non-consent (No) to the left with your initials:

Yes No I understand that as part of an overall school experience (which could include performances, ceremonies, sporting events, school life photos, etc.), images of students may be recorded by UCDSB staff, as well as external parties, for use in public social media, print media, or televised. This can include my child's name/image, student work, or performance as they are involved in educational/extra-curricular activities before, during, or after school. Personal information collected and disclosed in this manner, once made public, is beyond the control of the UCDSB. I consent to this for my child. In the event of non-consent, please be aware that we will do our best to comply within our capabilities while recognizing that recording devices are readily available, and we are not able to eliminate the potential for publication 100%.

Yes No I understand that **individual student and/or classroom group photographs** may be taken by a **photography agency** and acknowledge that such photos will be used as part of the Ontario Student Record, become public once sent home with each child, used in a school yearbook (which may be digital), and/or used in school displays. I consent to this for my child.

I acknowledge I have read all of the above and where my consent is indicated as "Yes", release any claim to the protection of personal privacy of my child under the provisions of the Municipal Freedom of Information and Protection of Privacy Act and will not hold the UCDSB responsible for any harm that may arise from the aforementioned. I release ownership, moral rights, or financial benefit, whether this use or disclosure is known or unknown to me.

Is there additional information you would like to add?

Please speak directly with your school Principal should you have any questions or concerns.

Yes I understand that I can, at any time, revoke my consent by informing my Principal in writing.

Yes I understand that this form will remain active on my child's file at the school until replaced by the most recent signed form.

Parent's/Guardian's Name (Print): _____

Parent's/Guardian's Signature: _____

Date: _____