Student Media Release Form – HCSMC Solo Artist Competition

Date:		HCSM
School:		or Condary Music Council
Student ID Number:		- y wust-
Student Name:		
Home Address:		
City:	State:	Zip:
Dear Parent/Guardian:		
events. Hillsborough Count videotape your child for pro posters, brochures, and ne special district events. Before	r, the media may visit your chil ty Public Schools also may wist omotional and educational reast ewsletters; on the Internet, radione your child can participate in sion by signing and returning the	sh to interview, photograph, or sons to utilize in publications, o, or television; or for other
for use in school/district Internet or by the gener his/her name to be publ news publications or bro I do not give my permis videotaped for use in so media for print, broadca	or my child to be interviewed, publications, school district preal news media for print, broadlished in school/district publical oadcasts. ssion for my child to be interviewed, proposed in school/district publications, or foast, or on websites; nor for his/ons, on the Internet, or in news	roductions, or for use on the cast, or on websites; and for tions, on the Internet, or in fewed, photographed, or use by the general news her name to be published in
-		n, your student must have a e in the HCSMC Solo Artist
Parent/Guardian signature:		
Parent/Guardian name (pleas	se print):	
Data:		