

Last Name \_\_\_\_\_

### BAND PHOTO RELEASE DOCUMENT

I, \_\_\_\_\_, parent of \_\_\_\_\_  
(Please Print) (Please Print)

\_\_\_\_\_ hereby give permission for my child's picture to be published in the band directory, band video, and band website for the school year of 2016-2017. I understand that in no way will the Male High School Band program, Louisville Male High School, or Jefferson County Public Schools be liable for any misuse of this publication by any party.

\_\_\_\_\_ do not give permission for my child's picture to be published in the band directory, band video, or band website for the school year of 2016-2017.

Student signature \_\_\_\_\_ Date \_\_\_\_\_

Parent signature \_\_\_\_\_ Date \_\_\_\_\_