

PHOTO AUTHORIZATION FORM

I agree to allow Mills River SDA School to use any pictures of my student, while on a school sponsored activity, for promotion of the school through newsletters, brochures, web pages, video presentations and **facebook**.

I understand that no personal information will be attached to the picture such as the student's last name or address, without my first being notified and asked for permission.

Student's name: _____

Parent's name: _____

Parent's signature: _____

Date: _____

Principal's Signature: _____

School: Mills River Seventh-day Adventist School

Date: _____

