Piscataway Township Schools wants to celebrate and share good news and student events throughout the district. During the school year, the students of Piscataway Township Schools may be photographed or videotaped while participating in school activities including concerts, plays, sports and other programs.

In order for us to produce programming that includes your son/daughter, please complete and sign the bottom portion of this form, which grants us permission to identify, photograph, and/or videotape your son/daughter while he/she is participating in school activities, and return it to your child’s school.

☐ Yes, I give permission for my child to be identified, photographed, and/or videotaped. I understand he/she may appear and be identified in publications, presentations, video segments, social media, and/or the district website. I understand that personally identifiable information on the district’s website is publicly available and Piscataway Schools cannot control who accesses or uses it.

☐ No, I do not want my child to be identified, photographed, filmed or videotaped.

________________________  ________________________
Student Name               Homeroom Teacher

________________________
Parent Name (Print)         Parent Signature

________________________
Date