

Thurgoona Public School

Excellence, innovation, opportunity—student success in a caring environment

OPT OUT MEDIA CONSENT FORM

Please note: Only complete the form below if you would like to OPT OUT of this Permission to Publish.

If there are NO changes, the previously signed Permission to Publish form assumes continued consent to publish for another school year.

Dear Parent/Caregiver,

I am seeking your permission to allow the school/Department of Education to publish and/or disclose information about your child for the purposes of sharing his/her experiences with other students, informing the school and broader community about school and student activities and recording student participation in noteworthy projects or community service.

This information may include your child's name, age, class and information collected at school such as photographs, sound and visual recordings of your child and/or your child's work.

The communication in which your child's information may be published or disclosed include but are not limited to:

- Public websites of the Department of Education and including the school website
- Department of Education publications including the school newsletter, annual school report, promotional material published in print and electronically, including on the Department's websites
- Official Department and school social media accounts on networks such as Facebook
- Digital parent communication portal (Sentral)

Parents should be aware that when information is published on public websites and social media channels, it can be discoverable online for a number of years, if not permanently. Search engines may also cache or retain copies of published information. Published information can also be linked to by third parties.

Jessica Brooker (Relieving Principal
-------------------	---------------------

OPT OUT MEDIA CONSENT FORM

I would like to WITHDRAW the consent described in the Peri	mission to Publish form above.
□ <u>I DO NOT</u> give permission for my son/daughter/wardphotographed, filmed or interviewed, in the circumstances outline	
□ I GIVE permission for my son/daughter/wardPhotographers (school photos).	to be photographed by MSP
This signed permission remains effective until I advise the s	school otherwise.
Parent/Caregiver signature:	Date:
Thurgoona Public Sci	hool
☐ 11 Bottlebrush Street, THURGO	OONA NSW 2640

© 02 6043 1244 © 02 6043 2045 @ thurgoona-p.school@det.nsw.edu.au



