



Bard College at Simon's Rock and Bard Academy at Simon's Rock Opt Out Media Release Form (as of April 7, 2023)

Instructions: Please complete all sections of this Opt-Out Form and return the signed form to communications@simons-rock.edu

STUDENT, FACULTY, & STAFF PHOTOGRAPHS, VIDEOS, AND/OR SOUND RECORDINGS OPT-OUT A parent or student may withhold permission to have said student photographed, videotaped, and/ or audiotaped during school sponsored or school sanctioned events. Upon signing this form, I confirm that I understand, either as a parent or student, that if I opt out my child or myself will not be included in pictures taken by school staff, students, or media and commercial photographers for any form of public promotion, nor will my child or myself be included public-facing media or news for Bard Academy and Bard College at Simon's Rock. Additionally, I understand that my student or I may be photographed by accident, but these photos will not be used publicly.

| Note: This does not include videotaping by security ca | ameras. |
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| I represent that I am at least eighteen (18) Release Form. | years of age and am fully competent to sign this Opt Out Media |
| If you do not want you or your child to be photographe sign: | ed, videotaped and/or audiotaped, check the box below and |
| DO NOT allow myself or my child to be photo school-sponsored activities and/or learning ex | ographed, videotaped and/or audio taped during xperiences. |
| (Minor Student Printed Name) | |
| (Parent/Guardian Signature) | (Date) |
| (Parent/Guardian Printed Name) | (Primary Phone Number) |
| OR | |
| (Student Signature) | (Date) |
| (Student Printed Name) | (Primary Phone Number) |