2021-2022 Hillsborough County Public Schools Student Likeness Release Form



School:	Student ID Number:	
Student Name (Last, First):		
Homeroom Teacher:		Grade:
Home Address:		
City:	State:	Zip:
Telephone Number:	Email:	
Dear Parent/Guardian:		
Throughout the school year, certain Hillsl involved with special events or activities a		artners and media members may be
Hillsborough County Public Schools also promotional and educational reasons to uparticipate in any of the above events of this likeness release form to your child's se	itilize in publications and special ractivities, you must give your	district events. Before your child car
Pleas	se select only one option below:	
school/district partners or sponsors, a grant my consent to such parties the information, and/or recordings of his, print, and/or digital, and for any purp advertising, marketing and promotion	and/or members of the general new right to use my child's physical liker/her voice in any media, including bose including but not limited to enton without compensation thereof. The compensation thereof, and the compensation thereof is or sponsors, and/or members of the compensation the internet, or incompensations, on the internet, or incompensations.	ness, other identifying characteristics, but not limited to, broadcast, cable, ertainment, news, education, ohed, or videotaped by the the general news media; nor for his/her n news Publications or broadcasts.
Parent/Guardian Name (please print):		
Parent/Guardian Signature		Date: