



Halifax Regional
School Board

STUDENT MEDIA RELEASE FORM

I, _____, hereby
(*Name of Student or Parent/Guardian if Student is under 18 years of age*)

consent to my child/children being:

filmed
audiotaped
interviewed
videotaped
photographed

by the media (print and broadcast), and employees, agents or servants of the

Halifax Regional School Board on May 24th and May 25th

at Beazley Field
(*Location*)

Name of Student: _____

Home Telephone Number: _____

Name of School: Madeline Symonds Middle School

(*Signature of Student or Parent/Guardian if Student is under 18 years of age*)

(*Date*)