



FAYETTE COUNTY PUBLIC SCHOOLS
 701 EAST MAIN STREET
 LEXINGTON, KY 40502
 (859) 381-4100

**AGREEMENT ON INTENDED USE
 OF STUDENT PHOTOGRAPHS OR AUDIO/VIDEO RECORDINGS
 FOR SCHOOL YEAR _____ - _____**

(MIDDLE OR HIGH SCHOOL STUDENTS)

I, _____, parent or legal guardian of _____, who is a Fayette County Public School student at _____ School, understand that students and staff engaged in school related activities at school and on school related trips have privacy rights. Subject to limited exceptions, daily activities and conduct occurring in the course of the school attendance are not subject to audio/video recording. (i.e. first day of school, last day of school, pep rallies or class trip.)

I agree that if my student or I make an audio/video recording or take a photograph at school or at school related activities, it will be used for personal viewing and enjoyment only and may not be used for a commercial purpose. I also agree that it will not be publicly disseminated, posted, uploaded or streamed to any website or other public forum without the permission of the school principal and each person depicted in the photograph or video.

I further agree that any audio/video recordings occurring in the classroom will be used only as a study aid and that they cannot be disseminated under any circumstances.

By signing this form, I acknowledge that I have read and understand this agreement and will abide by the conditions above.

 STUDENT SIGNATURE

 DATE

 PARENT/LEGAL GUARDIAN SIGNATURE

 DATE