

Southern Alleghenies Museum of Art

Artists in Schools and Communities

Photograph, Video and Media Release Form

Thank you for allowing us the opportunity to photograph and/or videotape your child and his/her/their artwork as he/she/their participates in a Southern Alleghenies Museum of Art's (SAMA) Artist Residency Project in Partnership with the PA Council on the Arts at _____.

Artists in Schools and Communities at SAMA provides unique and quality arts programs that place trained, knowledgeable practicing artists into school and community settings where they can share the benefits, skills, and joy of the creative process.

We appreciate the opportunity to photograph/videotape your child participating in activities involving Teaching Art and children working/creating in classroom and community settings. By documenting the creative arts process from beginning to end and capturing the energy, enthusiasm, focus, and pride reflected in each participant's face and work we will be better able to share the value and importance of the work to advocate for the continued exposure to and funding for the arts.

The photographs and/or images of your child and his/her/their artwork may be displayed and included in SAMA's and/or the Teaching Artist's, printed and/or electronic media publications including, but not limited to, catalogs, newsletters, websites, promotional DVDs and/or grant reports to regional funders as well as the PA Council on the Arts.

Your child will NOT be identified by name.

Please complete the information below and return this form to your child's teacher.

PLEASE SELECT and CHECK ONE:

I **do** give my permission to Southern Alleghenies Museum of Art and/or PA Council on the Arts to use the photograph(s)/video(s) of my child and/or images of his/her/their work for the above-stated purposes. I understand that there is no compensation of any kind for any use of my child's likeness or images of artwork.

OR

I **do not** give my permission to Southern Alleghenies Museum of Art and/or PA Council on the Arts to use the photograph(s)/video(s) of my child and/or images of his/her/their work for the above-stated purposes.

Child's Name: _____

Signature of Parent/Guardian

Date