

# MEDIA PERMISSION SLIP

## Dear Parent/Guardian:

We, as the Middletown Twp. Police Department, want to celebrate your child's work and his/her participation in our Police Youth Week Program. We are requesting permission for your child's image to be published.

Please check the space below giving permission for your child/children to be photographed. Then, detach the bottom of the form, sign it and return it on or before April 2, 2018.

Your signature/permission will remain in effect for the duration of the Middletown Twp. Police Youth Week Program.

-----DETACH AND RETURN ON OR BEFORE APRIL 2, 2018-----

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\_\_\_\_\_ **Full permission is granted.**

This includes the following as appropriate: Image/audio of my child and/or personal identifiers such as name, grade, school and teacher's class. This may include, but is not limited to, school/district website, local papers and school publications, including yearbooks/memory books, DVD's of school events (performance/shows), etc.

**Child's Name** (please print clearly): \_\_\_\_\_

**Child's Age:** \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_

**Date:** \_\_\_\_\_