



Media Release Form

We permit Four Corners Montessori Academy to use photography, films, videotapes and other facsimiles taken at school of our child or our child's work to be used in school brochures, videotapes, newsletters, yearbooks, slide presentations, web site and other publications concerning and/or promoting Four Corners Montessori Academy. I also relinquish any rights to examine and approve the completed materials prior to publication.

Parent/Guardian's Signature _____

Child's Name: _____

Child's Date of Birth: _____