



Schools Media Consent Form

As principal, **I give / do not give** (please circle or cross out) permission for the students of my school to be photographed, filmed and/or video taped, for audio only, audio and visual and/or visual reproduction by the organisers of **bstreetsmart** for external publicity purposes and also for internal communications.

I have already collected permission from all parents/ guardians.

School's Name: _____

Principal's Name: _____

Principal's Signature: _____

Date: _____

Please fax or email completed form to:

Fax: 8890 8321

Email: chapin@bstreetsmart.org

