



KENNESAW CHARTER SCIENCE AND MATH ACADEMY

PHOTO CONSENT FORM

*** Please return this form to your child's teacher***

Student Name

Grade

Teacher

Carpool Number

I authorize KCSMA to use my child's photo and name in **(check all that apply)**:

_____ Teacher blogs, school website, or printed marketing material. Child's name may be released in print.

_____ Yearbook

_____ None of the above

Parent Signature

Date

Parent Name