

Employer Photo Release Form

(please print)

Company/Employer Name: _____

Address: _____ Fax: _____

Contact Person: _____ Phone: _____

Position: _____ Department: _____

I hereby grant permission to the Vancouver School Board to use the photographs taken of myself /

my employees / my clients and/or _____

Print student name(s)

the student(s) on work experience from the Vancouver School District for use as indicated below:

(check items that you wish to allow)

- Publish Company Name
- Shoot video footage
- Take photographs to be published in print, or electronically reproduced for the VSB website.
- Interview and have comments exhibited, documented or published.

This name/photo/video footage may be reproduced in the following VSB publications: newsletters, pamphlets, brochures, calendars, reports, or on the VSB website without liability on the part of the Vancouver School Board, its facilities, agents and employees in which the photographs may appear to be used at any time in the future.

By signing this form, I give authorization to the Vancouver School Board, Career Programs Department for this purpose.

Contact/Employer Representative Signature:

Date

Contact/Employer Representative *(please print)*

Please keep a copy for your records and forward a copy to:

Vancouver School Board
Career Programs
1580 West Broadway, Vancouver, BC V6J 5K8
Fax: 604 713-5044