



WHITMORE LAKE EARLY CHILDHOOD CENTER

8845 Main St., Whitmore Lake, MI 48189

Phone: 734.449.1052 ext.4000 or 4001 | www.wlps.net

Exceptional, Personalized Education

Director Sue Wanamaker | Superintendent Tom DeKeyser

MEDIA RELEASE FORM

As the parent/guardian of _____,
(Student's legal name)

____ I authorize Whitmore Lake Early Childhood Center and the School District of Whitmore Lake to use photographs, audio recordings, slides, films, video recordings, writing samples, or press releases in which the above named student is involved for publication purposes, conferences, newspapers, radio broadcasting and/or television programming.

____ I **DO NOT** authorize Whitmore Lake Early Childhood Center and the School District of Whitmore Lake to use photographs, audio recordings, slides, films, video recordings, writing samples, or press releases in which the above named student is involved for publication purposes, conferences, newspapers, radio broadcasting and/or television programming.

**This release will remain in effect for one year or until I revoke it in writing to
Whitmore Lake Early Childhood Center**

Parent/Guardian Signature

Date

RENEWALS ONLY---

Parent/Guardian Signature (renewal)

Date of renewal