

Bristlecone Storytelling Festival

9998-500588

Clark County School District

CCF-588
07/09

ANNUAL RELEASE AND NETWORK ACCESS FORM

Student Name: _____ School Year: _____

School: _____ Grade: _____ Track: _____ Student ID Number: _____

Please read the attached Instruction Sheet carefully before signing this document. The **parent/guardian** must complete all three sections below: (1) Restrict Release of Directory Information; (2) Media Release; and (3) Computer Network Access.

1. RESTRICT RELEASE OF DIRECTORY INFORMATION (to be completed by **parent/guardian**)

FERPA allows the Clark County School District to release Directory Information (which is defined in the "Instruction Sheet") without the consent of the parent/guardian. However, a parent/guardian has the right to opt-out of that disclosure. I hereby request that Directory Information for my child **NOT** be released to the following agencies or organizations:

- Withhold Directory Information from Military Only Withhold Directory Information from all agencies
- Withhold Directory Information from all agencies, with the exception of allowing the release of Directory Information solely for the purpose of inclusion in printed CCSD school publications such as the annual yearbook, playbills, honor roll or other recognition lists, graduation programs, newsletters, and sports activity programs/sheets.

2. MEDIA RELEASE (to be completed by **parent/guardian**)

I **give** **do not give** permission for the Clark County School District to release my child's name, photograph, and/or audio/video/film reproduction for use in **internal** media publications, newspaper articles, television coverage, newsletters (including school newsletters), video presentations, and/or school district presentations. I understand that the material may be reduced to either print or electronic format, and may be utilized in internal media sources.

I **give** **do not give** permission for the Clark County School District to release my child's name, photograph, and/or audio/video/film reproduction for use in **external** media publications, newspaper articles, television coverage, websites (including CCSD.net), newsletters (including school newsletters), video presentations, and/or school district presentations. I understand that the material may be reduced to either print or electronic format, and may be utilized in external media sources.

3. COMPUTER NETWORK ACCESS (to be completed by **parent/guardian**)

I **give** **do not give** permission for my child to access, produce, video conference, and communicate information on the District computer network resources in accordance with Acceptable Use Policy. Student work, artwork, or projects will be identified by first name, grade, and school only. Students who do not have parent/guardian permission to use the District's computer network will be given alternative educational activities.

The signature of the parent/guardian below applies to **all three releases** set forth above.

Printed name of Parent/Guardian _____

X

Signature of Parent/Guardian _____

Date _____

COMPUTER NETWORK ACCESS (to be completed by **student**)

I understand and will abide by the Acceptable Use Policy of the Clark County School District. I understand that violating the Acceptable Use Policy may result in loss of network privileges and/or other District disciplinary measures.

Student signature _____

Date _____

Registration Card

"Festival Ready" Student Storyteller

Teller's Name: _____ Grade: _____

School: Green Valley High School

Title of Story: _____

Length of Story (limited to five minutes): _____

Why did you choose your story and /or why do you love storytelling? _____

Completed media release form attached:

yes

no