



Ontario Secondary School Teachers' Federation

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Student Photo Release Form

I give my permission to the Ontario Secondary School Teachers' Federation (OSSTF) to photograph _____ (student name), for the purposes of use in OSSTF District 16's newsletter and website and to be considered for later OSSTF non-commercial publication use. Note that OSSTF will own all images.

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Parent Signature (if student <18): _____

Student Signature (if 18+): _____

Date: _____

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Name of School: _____

Name of Event: _____