



EcoLand Early Learning Center
1200 S. Danville Road
Kilgore, Texas 75662
903-988-7680

*The highlighted selection should be checked and/or filled out by the teacher.

I hereby give permission for my child, _____
To be video recorded and/or photographed during educational activities with the Region 7 Education
Service Center on: _____

I further consent to allow the Service Center to retain any work product created by my child in conjunction with the
said educational activities.

I understand that my child will be identified by his/her first and last name. I also understand that the name of the
class, school and city in which my child is located may be identified during the videotaping and/or photography or in
any corresponding reproductions in publications and on the Internet.

I further understand that these videotapes, photographs and/or work product of my child are property of EcoLand,
1200 S. Danville Street and Region 7 Education Service Center, 1909 North Longview Street, Kilgore, Texas 75662. I
acknowledge the intended purpose and provide permission for the recording, photographs and/or work product to
be used to explain the programs and services, to illustrate teacher instruction activities, or to allow participation in a
video event. Permission to publish the videotapes, photographs and/or work product includes permission and
consent to reuse, disseminate, copyright, print, reproduce, publish and republish for any commercial, advertising,
public purposes and for educational use.

In addition to the consent provided by my signature below, I hereby release and discharge Region 7 Education
Service Center staff from any and all claims and demands arising out of or in connection with the use of any of the
foregoing, including defamation, invasion of privacy, or violation of any statutory right.

Signature of Parent or Guardian

Date

School District

Campus

Teacher Name

Event

Date

"Region 7 Education Service Center is committed to district, charter, and student success by providing quality programs and
services that meet or exceed our customers' expectations."



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***La sección resaltada se deben revisar y/o llenado por el maestro.**

Por este medio doy permiso para que mi niño(a), _____

sea grabado(a) y/o fotografiado(a) durante las actividades educacionales con Region 7 Education Service Center el día _____

También doy permiso al Centro de Servicio de conservar cualquier producto de trabajo creado por mi hijo(a) relacionado a dichas actividades educacionales.

Yo entiendo que mi niño(a) va a ser identificado(a) por nombre y apellido. El nombre de la clase, escuela y ciudad en la cual mi niño(a) está localizado(a) puede ser identificado durante la grabación y/o fotografía o en cualquier reproducción correspondiente en publicaciones y en la Internet.

Yo entiendo además que estos videos y/o fotografías son propiedad del Region 7 Education Service Center, 1909 North Longview Street, Kilgore, Texas 75662. La grabación y/o fotografías serán usadas para explicar los programas y los servicios, para ilustrar las actividades educativas de los maestros o para permitir la participación en un evento de video. Los propósitos de publicación incluyen permiso y consentimiento para reutilizar, distribuir, registrar los derechos, imprimir, reproducir, publicar y volver a publicar para cualquier propósito comercial, de publicidad y público.

Por este medio libero y exonero al personal del Region 7 Education Service Center de cualquier y de todas las reclamaciones y demandas surgidas de o en conexión con el uso de cualquiera de lo anterior, incluyendo difamación, invasión de privacidad o violación de cualquier derecho legal.

Firma del Padre o Tutor

Fecha

Distrito Escolar

el Campus

Nombre del maestro

Evento

Fecha

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