



Publicity Release Form Summer School 2025

PLEASE CHECK EACH ITEM.

- | | YES | NO | |
|----|--------------------------|--------------------------|---|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | I hereby give permission to The Winston School San Antonio (WSSA) to use my child's first name and first initial of their last name and/or photograph for promotional consideration in school publications, website, and social media pages for the promotion of school related activities. |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | I hereby give permission to WSSA for the right to use my child's image and/or voice for videos that may be taken for promotional consideration on television, the school's website, social media and/or educational purposes in conjunction to school activities. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | I hereby give permission to WSSA to have my child's name and/or photograph in the school's yearbook . |

Student's Name

Grade

Student's Name

Grade

Student's Name

Grade

Parent/Guardian Signature

Date