



**School District No. 51 (Boundary)**  
**Notice to Parents and Students: Outside Media in Schools**  
**Effective from date of enrolment to date of withdrawal**

*For parents\* and high school students: Please complete, sign, and return to your school.*

**Student's Name:** (Last) \_\_\_\_\_ (First) \_\_\_\_\_  
*(please print)*

**School:** \_\_\_\_\_

Media (including radio, television, newspapers, and other print and online media) are sometimes permitted or invited to come to the school or to school activities and allowed to take photos or video or conduct interviews with students, for the purposes of promoting public understanding of school programs, building public support for public education, and encouraging student achievement.

**If you do not want your child to be involved in such activities**, you need to:

- Tell your child to avoid these situations,
- Tell your child's teacher of your wishes,
- Complete and return the form on the back of this page to ask the school and school district to take reasonable steps to avoid this type of publication of your child's name, image, or personal information by outside media.

Note that school and district staff cannot control news media access, photos/videos taken by the media or others in public locations (such as field trips or off school grounds) or school events open to the public, such as sports events, student performances, Board of Education meetings, etc.

**For Parents:** I acknowledge receipt of this Notice. If I have questions I will contact the School District Information and Privacy Officer.

\_\_\_\_\_  
Parent's signature

**For Students:** I acknowledge that I am primarily responsible for protection of my personal privacy while at school and at school activities and will take appropriate steps to do so.

\_\_\_\_\_  
Student's signature

*\*For parents who have court orders describing their parental rights, this form should be signed by the parent who has the right to exercise the student's privacy protection rights.*

**Notice to School District re: Outside Media**  
**Effective from date of enrolment to date of withdrawal**

**NOTE:** *To be completed only if you wish to register an objection to publication of your child's personal information by outside media at school events.*

I **do not want** my child's image or name being published by outside media. I have told my child's teacher of my wishes. I **REQUEST** that the school district and its staff take all reasonable steps to avoid having my child's image or name collected or published by outside media when they are present in school or at school activities at the invitation of the school or school district. I **CONSENT** to disclosure by the school district or its staff of the personal information that is necessary to give effect to this request. I **MAY** choose to override this Notice by giving my consent in a specific circumstance. This request applies while my child is enrolled in the school unless I expressly revoke it.

**Date:** \_\_\_\_\_

**Parent's Name:** (Last) \_\_\_\_\_ (First) \_\_\_\_\_  
(please print)

**Parent/Guardian\* Signature:** \_\_\_\_\_

**Parent/Guardian Contact Information** (for contacts related to this notice)

**Telephone No.:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**For Students:**

I am aware of my parent's wishes as expressed above. I understand that I am primarily responsible for the protection of my own privacy at school and at school activities and will take appropriate steps to do so.

**Student Signature:** \_\_\_\_\_

*\*For parents who have court orders describing their parental rights, this form should be signed by a parent who has the right to exercise the student's privacy protection rights.*

If you have questions about this notice or about the collection of student personal information, you may contact:

**The School Principal or the Superintendent of Schools**

**Business Address:** 1021 Central Avenue, Grand Forks BC V0H 1H0

**Telephone No.:** 250-442-8258