



# media education

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Permission is sought to reproduce your child's image, voice, writing or artwork.

To be completed by student’s parent/guardian		
Student’s name:		
Address:		
Name of primary parent/guardian:		
Phone:	Home:	Mobile:
Email:		
School:		Year Level:
PUBLICATION CONSENT		
<b>PLEASE COMPLETE AND SIGN BELOW</b>		
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Name.....		Relationship to student .....
Signature .....		Date .....

- If aged under 18, this form must be signed below by a parent / guardian / carer.
- To submit images, query this matter or to withdraw permission in the future, please email [info@mediaeducation.com.au](mailto:info@mediaeducation.com.au) or phone 9482 3717.

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