**ART DEPARTMENT: SOUTH CREEK HIGH SCHOOL**

***This sheet contains information that must be reviewed by the student and the parent. The bottom of this sheet must contain the signatures of both signifying that such information has been read and accepted. The signed sheet will be kept confidential.***

**CLASSROOM EXPECTATIONS ------------------------------------------------------------------**Students are expected to follow and adhere to this list of classroom expectations both inside and outside of the classroom when taking art class.

* Respect Yourself and Others
* Respect Materials and Artwork
* Be Prepared for Class
* Cell Phone/IPOD dead zone (none in classroom)
* Food/Beverage Free Zone (except for bottled water)

**ALLERGIES/HEALTH INFORMATION---------------------------------------------------------**

The art classroom is an all-inclusive environment. However, some materials used in the art classroom do have safety precautions and must be approached safely. On the attached sheet, please list allergies to food and to the environment (as few classes may be held outside). If a student is pregnant, please notify the art department as soon as possible as some materials are toxic and should not be handled by those who are pregnant.

**PHOTO AND VIDEO RELEASE-------------------------------------------------------------------**

I hereby grant the Art Department of South Creek High School the right to use and reproduce any and all photographs, video clips, and/or audio clips taken of my child in conjunction with their involvement at South Creek High School in any school newsletters, brochures, web sites, flyers and publications, or any outside school approved publications such as newspaper, magazines, web sites promoting the school or reporting on activities associated with the school.

I waive the right to inspect or approve the finished version(s) of such images including written copy that may be created in connection therewith. Consent is also granted for any use of my child’s name in any part of those publications listed above. I understand that photos/audio/video used by the school for the reasons stated above, are considered the property of South Creek High School and may not be sold or reused without the express consent of school officials or administration. I understand that there is no monetary compensation for use of my child’s image and that this waiver/release is good for the entire time that my child is enrolled at the school.

**VIDEOS IN THE CLASSROOM** ----------------------------------------------------------------------

Instructional videos often serve as learning tools in conjunction to teaching in the art classroom. At times, videos have been produced about artists, artworks, architecture, or historical time periods dealing with the art world. Such videos may have a PG, PG-13, or PG-17 rating. By signing the “Videos in the classroom” section on the back of this page, you are stating that you allow your student to watch an educational video with such a rating in the art classroom as long as it serves to further the student’s learning in the current art subject.

I have read this document and am fully aware of the consent and implications, legal, and otherwise.

**CLASSROOM EXPECTATIONS:**STUDENT: (Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Sign)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT: (Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Sign) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ALLERGIES:**

My student has the following allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**PHOTO/VIDEO RELEASE WAIVER, VIDEOS IN THE CLASSROOM**

STUDENT: (Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Sign)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PARENT: (Print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Sign)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_