



**2811 LaForce Blvd.
PO Box 60580
Midland, TX 79711-0580**

In light of the protection granted by the Family Educational Rights and Privacy Act of personally identifiable student information, Region 18 Education Service Center desires your permission regarding the publication/display of your child's art work.

I hereby give my permission to Region 18 Education Service Center to publish/display my child's art work, written work, voice, picture (video or still), or other information described above relating to my participation in its programs, and I release Region 18 ESC from any liability resulting from or connected with the publication of such work and information.

Signature: _____ Date: _____
(Parent or Guardian signature if participant is under 18 years of age)

If applicable, please list all underage participants covered by this agreement:
