



# RIVER CITY SCIENCE ACADEMY

---

---

## Photo Release Opt Out

I, \_\_\_\_\_, do not grant permission for my child's picture to be photographed and appear in RCSA Rocket Reader Newsletters, RCSA website, or RCSA's Facebook page.

Student Name (please print): \_\_\_\_\_

Parent Name (please print): \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_