

**MEDIA CONSENT FORM**  
**KanLovKids Program**

KanLovKids Program supports the practice of protection of the rights of participants. The information with this consent form is provided so that you can decide whether you wish to have your child featured in training, instruction, and/or marketing media for families, professionals and students. It is important that you understand that your participation is considered voluntary.

With your signature you are agreeing:

- To allow your child to be photographed.
- Photos of your child may be shown:
  - 1) during trainings or presentations to local, statewide, national and international service providers;
  - 2) for printed marketing materials and websites for the KanLovKids Program and Kansas State School for the Blind.

I understand that if I have any questions or concerns regarding this project, I can contact Anne Nielsen, Outreach Director, Kansas State School for the Blind, 1100 State Avenue, Kansas City, KS 66102, e-mail [anielsen@kssdb.org](mailto:anielsen@kssdb.org), (913) 620-3045.

\_\_\_\_\_  
**Signature**

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

\_\_\_\_\_  
**Name (Please Print)**

\_\_\_\_\_  
**Child's Name (Please Print)**

\_\_\_\_\_  
**Relationship to Child**

\_\_\_\_\_  
**Phone Number**

\_\_\_\_\_  
**E-Mail**