



**south dakota**  
**DEPARTMENT OF EDUCATION**

South Dakota State Library

Permission Form

**Photo/Video Permission Form**

I, \_\_\_\_\_, am 18 years or older.  
(name, please print)

I, \_\_\_\_\_, am the parent or legal guardian  
(name, please print)

of \_\_\_\_\_ age \_\_\_\_\_.  
(child's name, please print)

I give my permission for the South Dakota State Library, an office of the South Dakota Department of Education, to use the image(s) taken of me (or my child).

I understand that these images may be used for the purpose of reports and promotion of the South Dakota State Library. This includes short-run publications, the South Dakota State Library websites and social media sites.

**Child/Parent:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Signature

**Address:** \_\_\_\_\_  
Please Print

**City/State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_  
Signature

**Phone/Email:** \_\_\_\_\_  
Please Print

**SDSL Staff/ Photographer:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Signature

In the event this form needs to be signed by a parent/guardian at a later time, please have this form completed within two weeks of the event and returned to Wynne Nafus Sayer, Information Officer; South Dakota State Library; 800 Governors Drive; Pierre, SD 57501. The completed form may also be scanned and emailed to [Wynne.Sayer@state.sd.us](mailto:Wynne.Sayer@state.sd.us).

Thanks!