



Lyneham Primary School

Preschool to Year 6

14/3/2017

Dear Families,

The school has been requested by MSP Photography to provide personal information of your child's name and class/year for the purpose of taking, printing and distributing individual student and class school photographs.

On enrolment you provided the school with personal information that assists the school to support the educational needs of your children while they are enrolled in an ACT Government school. The *Privacy Act 1988* states that this information cannot be used or released without satisfying certain conditions. The school seeks your permission to release the information requested by MSP Photography authorised representative as detailed in the accompanying form. The *Privacy Act 1988* requires the school to notify MSP Photography that they shall not use or disclose the information provided for a purpose other than the purpose for which the information was released.

Without your permission, confirmation of attendance at this school and personal details of your child/children will not be provided to MSP Photography and consequently, your child will not be included in student photographs.

Please read the form below *Authority for Use or Release of Personal Information* carefully and return it to the school by Friday 24th March.

Annamaria Zuffo

Principal

AUTHORITY TO USE OR RELEASE PERSONAL INFORMATION TO SCHOOL PHOTOGRAPHERS

This authority relates to the personal information of my child/children. Please print clearly:

First Name	Last Name	Class & Year level
_____	_____	_____
_____	_____	_____
_____	_____	_____

I authorise the school, as the record keeper, to use and/or release personal information including the names and class/year of the children named above for the following purpose:

Confirmation, use or release of personal information to MSP Photography to administer and print individual student and class school photos. *This authority is valid while the children named remain enrolled at this school or until advised otherwise in writing.*

Parent/Carer: _____ Date: _____

Email: info@lynehamps.act.edu.au Phone: 6205 6511 www.lynehamps.act.edu.au

Fax: 6205 6510 Afters 62056514