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Form 181-1: Surveillance Video Release Form

This form may only be used to release a Fort McMurray Public School Division video recording device or a copy of Fort McMurray Public School Division surveillance videos.

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Date	Time			File #			
Name of Oshard/Easility			ID#		Time of Our willow on Mide a		
Name of School/Facility			Location of Video Storage Device		Type of Surveillance Video		
	□ In-Use			Tape (CD Disk		
Used		U Other (Specify)					
Name and Desition of Authorized EMDOD ledicidual Delegation a Constraint of Authorized Video Describer Desited							
Name and Position of Authorized FMPSD Individual Releasing a Copy of the Surveillance Video or the Video Recording Device							
(Please Print)							
Signature							
Purpose or Reason for Release							
	,						
Name of Individual Taking Cus	tody of the Copy of	the Surveillance Video					
(Please Print)							
Acknowledgment of Receipt	and Indemnity						
Acknowledginent of Necelpt	and muchning						
I, the above noted individual, o	n behalf of my emp	loyer, acknowledge re	ceipt of a Fort McMurray F	Public School Division	video recording device or		
a copy of the Fort McMurray Public School Division surveillance video or and agree that I and my employer will hold The Fort McMurray School							
Division harmless for any damage that occurs due to the release of the video recording device or surveillance video while in my custody or under							
my control.							
Signature							
Position	ID	or Regimental #	Employer/Organization	T	elephone Number		
	15	or regimental #	Employen ergamzation				
A separate form must be completed each time a surveillance video or video recording device is released. A copy of the form must be kept at							
the Fort McMurray Public So	chool Division and a	a copy must be provide	d to the individual taking of	custody of the copy of t	he surveillance video.		
Surveillance Video means v	videotane or any oth	artana CD disk or ot	her device used to store in	formation from a video	surveillance system		
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