MEDIA RELEASE FORM

The Church of the Holy Family Religious Education/Youth Ministry will not photograph videotape and/or voicetape individuals in its programs without consent. *This form allows you to give permission for your child/children to be photographed, videotaped and/or voicetaped by program personnel and/or area news reporters.* Photographs, videotapes and/or voicetapes, when consented to, will only be used for the purposes you specify below.

I,______, herby **give permission** for the personnel of The Church of the Holy Family to photograph, videotape and/or voicetape my child/children (or allow area news reporters to do the same) for purposes of (circle the items that you will allow):

1. Public Information for Promotion of Parish Programs

2. Parish Purposes Only

3. Parish Website and Parish Social Media

4. Catholic Charities of Shiawassee/ Genesee Counties Website

This consent must be re-examined and signed each year.

Parent/Guardian Signature: _____

Student Name(s):

Date: _____