



Office of Religious Education
Directory for Catechesis

PERMISSIONS TO PUBLISH CONSENT FORM

PHOTO/VISUAL CONSENT

Name of Parent or Guardian _____

Name of minor child _____

Gives permission for **DANIEL LAPOLLA**

Of **BLESSED SACRAMENT & ST. ELIZABETH ANN SETON** Parish.

☐

I give permission for my son/daughter to be photographed or videoed at **BLESSED SACRAMENT & ST. ELIZABETH ANN SETON** Parish. I realize that the photo or video may be published in the newspaper, magazine, parish website, or other publication deemed appropriate by the Parish for informational or educational purposes regarding the Parish's programs or curriculum.

OR

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I have read the Photo/Visual Consent and do NOT give permission for my child to the above request.

PERMISSION TO PUBLISH ON THE INTERNET

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I give **BLESSED SACRAMENT & ST. ELIZABETH ANN SETON** Parish the right to use the following participant material for my son or daughter for inclusion on the internet ONLY on the Parish

Website or other media platforms under the Parish name. I affirm that I have the legal right to issue such consent.

Check ALL that apply. (A blank space indicates the intent of the parent or guardian to NOT allow that information on the Parish Website or other media platforms under the Parish name.)

☐

First name only

☐

Photo of Participant project

☐

Group photograph

☐

Individual participant photo

SIGNATURE _____ Date _____