Location Name: <u>St. Francis of Assisi Church, Castle Rock, CO</u>

CONSENT FOR RELEASE

THIS FORM IS REQUIRED EVERY YEAR BY ST. FRANCIS OF ASSISI CHURCH. YOUR CHILD(REN) WILL NOT BE ENROLLED WITHOUT THIS FORM ON FILE.

INTRODUCTION

This form is used to obtain written consent for use of a minor's name and/or audio/video depiction from the minor's parent or guardian. The use of any name or likeness is limited to the announcement, acknowledgment of achievement or participation, and information about or promotion of an applicable ministry or event.

CONSENT

Please select **YES** before any description that you **do authorize** for release/use. Please select **NO** before any description that you **do NOT authorize** for release/use.

First Name:

- YES NO Use of the minor's first name only in any publication intended for <u>public distribution</u>. (Social media, website, written work or artwork, television, newspapers, brochures, etc.)
- YES NO Use of the minor's first name only in any publication intended for <u>distribution within</u> the parish, school, or diocese. (bulletin, newsletter, written work or artwork, internal streaming video, bulletin board, other related internal electronic communication, etc.)

Audio/Video:

- YES NO Use of the minor's likeness in any medium intended for <u>public distribution</u>. (Social media, website, written work or artwork, television, newspapers, brochures, etc.)
- YES NO Use of the minor's likeness in any publication intended for <u>distribution within</u> the parish, school, or diocese. (bulletin, newsletter, written work or artwork, internal streaming video, bulletin board, other related internal electronic communication, etc.)

PLEASE NOTE: IF YOU WISH TO MAKE ANY CHANGES TO THE ABOVE AUTHORIZATIONS, YOU <u>MUST</u> NOTIFY THE PARISH OFFICE.

Please PRINT the names of <u>all</u> minors included in this Consent:

Printed name of parent/guardian

Signature of parent/guardian

Date

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