

Photo Release Permission Slip

As a parent or guardian of _____, I hereby consent to the use of photographs/videotape taken during the course of Vacation Bible School for publicity, promotional and/or educational purposes (including publications, presentation or broadcast via newspaper, internet or other media sources). I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

____ Yes, I give consent for Holy Family to photograph my child for Vacation Bible School purposes and/or at school events.

____ No, I do not authorize Holy Family to photograph my child for any event.

Parent Signature: _____

Date: _____