



**Office of Faith Formation for Children**  
**Student Media/Photo Release Form 2017-2018**

I, the parent/legal guardian of \_\_\_\_\_  
(First and Last Name of each child)  
\_\_\_\_\_  
\_\_\_\_\_

grant my express permission for the above named student(s) to be photographed/videotaped during events sponsored by the Office of Faith Formation for Children.

I understand that these pictures/videos may be displayed at parish events, may appear in the parish bulletin and website, on posters, in the diocesan newspaper, and on Church bulletin boards without any names. I also understand that these pictures/videos will not be viewed for monetary gain.

By signing this release, I acknowledge that I hereby release and forever discharge St. Margaret Mary Church and the Diocese of Orlando and the trustees, officers, agents and employees of the parish and Diocese from and against any and all claims, damages or suits.

Signature of Parent/Legal Guardian \_\_\_\_\_

Date \_\_\_\_\_