



St John Vianney Catholic School

Photo release and Consent Form

I do hereby authorize St. John Vianney Catholic School, its agents, successors, subsidiaries, and/or affiliates to photograph my child(ren) and allow said photograph(s) of my child(ren) to be used/published in brochures, newspapers, newsletters, web sites, and/or miscellaneous publications without limitation. Said photograph(s) shall be and remain the property of St. John Vianney Catholic School. Said photograph(s) may be used with or without using my child(ren)'s name(s). The photograph(s), if edited, have not been submitted to me for inspection or approval prior to publication.

I agree that there is no cost to me for having the(se) photograph(s), if in fact the(se) photograph(s) are published.

I also agree that I will not be compensated for allowing the(se) photograph(s) to be taken, whether published or not.

I hereby represent and warrant that I am of legal age, and the I have not given any person or firm the exclusive right to use my name, picture or any other information. There is no other agreement between us.

Dated this _____ day of _____, 20_____.

Child(ren)'s Name(s)

Child(ren)'s Name(s)

Parent's Name (printed)

Parent's Signature