

# HOLY TRINITY CATHOLIC SCHOOL

235 South Beaver Street  
York, PA 17401  
Telephone 717-854-8263

## Parent/Guardian Permission for Student Photo and Video Release Form

A copy for each child must be on file with the school regardless of the responses to the questions.

For each of the following release and/or permission statements below, please indicate with a YES or a NO as to whether or not you agree to each statement. Please follow each reply with a parent's/Guardian's initials. **Every Statement Must Have A Response!**

YES/NO Initials

- \_\_\_\_\_ I give consent for photographs of my child to appear within the classroom.
- \_\_\_\_\_ I give consent and agree for photographs of my child to appear within classroom projects that will be sent home with all classroom students.
- \_\_\_\_\_ I give consent and agree for photographs of my child to appear within the school.
- \_\_\_\_\_ I give consent and agree for photographs of my child to appear on the school's web page and/or other news media outlets\*.
- \_\_\_\_\_ I give consent and agree for my child's name to accompany any picture of him/her that may appear on the school's web site and/or other news media outlets\*.
- \_\_\_\_\_ I give consent and agree for video/digital recordings of my child to occur and be viewed within the classroom.
- \_\_\_\_\_ I give consent and agree for video/digital recordings of my child to occur as a classroom project that will be sent home with all classroom students.
- \_\_\_\_\_ I give consent and agree for video/digital recordings of my child to occur and be viewed within the school.
- \_\_\_\_\_ I give consent and agree for video/digital recordings of my child to occur and be posted for viewing on the school's web page and/or other news media outlets\*.
- \_\_\_\_\_ I give consent and agree for my child's name to accompany any video/digital recordings of him/her that may appear on the school's web site.
- \_\_\_\_\_ I give consent and agree for my child's name to appear in print on the school's web site and/or other news media outlets\*.

\*Other news media outlets would be *The Catholic Witness*, *The Patriot News*, etc. and/or Channel 27, Channel 8, etc.

I hereby agree on behalf of my child \_\_\_\_\_ and with the agreement of his/her other parent or legal guardian to waive any claims against this school, the Diocese of Harrisburg (and any diocesan or school officials, agents or employees) which may arise from the use of said picture/pictures/videotape/digital recording of **Holy Trinity Catholic School** student/students in the above described event.

Child's/Student's Name \_\_\_\_\_

If at any time, I want my child's photograph and/or recording to be removed from any use, I acknowledge that it is my responsibility to inform in writing the Principal of this decision.

**By signing, Parents/Guardians acknowledge, agree to and give consent for their child to be photographed and/or video/digitally recorded and for their images to be displayed in the venue indicated by their responses above.**

Parent's/Guardian's signature \_\_\_\_\_ Date \_\_\_\_\_

