



Photography & Video Consent and Authorization Form

I, (Parent/Guardian) _____,

(Please type or print name)

Hereby consent that any still or electronic image and or audio recording, in which I or my child may appear, may be used by, **Catholic East Elementary School or the Archdiocese of Milwaukee.**

I understand that these materials are being used for promotion of, **Catholic East Elementary School or the Archdiocese of Milwaukee.** The images and/or recordings may be used to support recruitment, fundraising, evangelization and other communication efforts.

I release the staff and volunteers and I understand and agree that the use of my picture is not an invasion of privacy. Neither I, nor anyone claiming to be speaking on my behalf, will later object to the Archdiocese's use of this/these photographs.

PLEASE PRINT CLEARLY

Name of Parent/Guardian _____

Name of Child/ren: _____

Telephone: Home: () _____ Cell: () _____

Address: _____

City: _____ State: _____ ZIP: _____

Signature of Parent/Guardian _____

Date signed: _____

Notes:

Complete and Return this form to the school office by September 2, 2015