

## PHOTO/VIDEO RELEASE FORM 2023-2024

Child's name: \_\_\_\_\_

I consent to my child's image being used on St. Matthew's Class Do	jo app ( <mark>privat</mark>	<mark>e</mark> ).
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\_\_\_\_\_I consent to my child's image being used on St. Matthew's Facebook page (public).

\_\_\_\_\_I consent to my child's image being used on St. Matthew's website (public).

\_\_\_\_\_I consent to my child's image being used on St. Matthew's families Facebook group (private)

## **PLEASE INITIAL BELOW**

\_\_\_\_\_I understand this form will be used for the entire term my child will be attending St. Matthew's Parish Day School, unless I request a change.

\_\_\_\_\_ I understand my child's image and video participation will be used **ONLY FOR THE PLATFORMS I CHECKED ABOVE**.

\_\_\_\_\_I understand my child's teacher will be informed at the beginning of each school year, or classroom change, whichever comes first, of my family's preference(s).

## Parent/ Guardian's Signature: \_\_\_\_\_

DATE: \_\_\_\_\_

## For office use:

Added to spread sheet	
Informed the teachers	