



PHOTO / VIDEO RELEASE FORM

- I consent to my child's image being used on St. Matthew's Class Dojo app (private)
- 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). _____

Child's Name: _____

Parent/Guardian's Signature: _____

Date: _____

ST. MATTHEW'S PARISH DAY SCHOOL PTO

_____ I would like to be added to St. Matthew's P.D.S. family directory. (Information will be obtained from your child's application).

_____ I would like to become a member (no obligation of any kind) of St. Matthew's P.D.S. PTO. Please indicate below what parent(s).
