



PHOTO RELEASE

_____ Yes, I hereby grant (Powers Catholic High School), their legal representative, or those for whom they are acting, the absolute right and permission to copyright and use photographic portraits or pictures of my child for display during the 2014/2015 school year. Photos may be used for marketing purposes such as in the church bulletin, displays, diocesan or school websites, FAITH magazine, etc.

I hereby waive any right I may have to inspect or approve the finished product or products.

I hereby release (Powers Catholic High School), their representative, or those for whom they are acting, from any liability for any violation of any personal or proprietary right I may have in connection with the use of the above stated images.

I state further that I have read the above authorization, release and agreement and that I am fully familiar with its contents.

_____ No, I decline to have my child's photograph displayed; however, I do allow my child to be in unidentified group pictures with no names mentioned, such as pictures displayed for Catholic Schools Week.

Printed Name of
Child: _____ Grade: _____

Printed Name of Parent or Guardian: _____

Street
Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (____) _____

Signature of Parent or Guardian: _____ Date: _____