Publication Consent Form

Dear Parent/Guardian:

At some time during the school year, Paducah Faith Formation Staff, Catechists, and other authorized persons may videotape or photograph classroom activities, special projects or program-related activities in which your child participates for public awareness purposes.

This form covers permission for Paducah Faith Formation to record and use the recorded image, voice, or work of the student (photographed, filmed, taped, or digitally recorded) for public awareness purposes, including emails, flyers, parish bulletins, and program-approved websites including Facebook, etc.

Please review this form carefully, sign and date. Once signed and dated, this form shall remain in effect for your child’s enrollment in the Paducah Faith Formation program. However, at any time during the school year, you may amend this form only for future uses/preferences by notifying the Director in writing of your request.

\_\_\_\_\_\_\_ I/We give Paducah Faith Formation permission to release my/our child/s name, photograph, work, and/or audio/video reproduction for publication to the general public concerning Paducah Faith Formation functions, class activities, and projects.

\_\_\_\_\_\_\_ I/We do **NOT** give permission for the above.

Student’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Name (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Signature \_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_