



Children and Youth Photo Release Form 2011-2012

Date \_\_\_\_\_

Child(ren) name (s) \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ I/we hereby give permission for St. Basil School and any of its affiliated organizations, including, but not limited to Diocese of Kalamazoo, to use the name of my child and/or his/her photograph for promotional, news, or public relations purposes in print and/or electronic media.

\_\_\_\_ Please do not use my child(ren) in any media.

\_\_\_\_\_

Signature of Parent/Guardian