## Authorization Form For Use of Child/Youth Name, Likeness, and/or Photographic Image

This authorization form shall serve as parental permission for the use of name, likeness, and/or photographic image of a child/youth where such permission is required.

I grant permission to	•
St John The Baptist and Immachate Concepted (Diocesan Office, Department, Paris	on. h, School)
to use my child's/youth's name, likeness, and/or photographic following:	image in the production of
Socramental Celebration Religious Education  Parate Celebration Cotholic Register Social S  (Above portion must be completed - DO NO	Youth Broup
(Above portion must be completed - DO NO	T sign if blank.)
I understand that if, for whatever reason, at any point in time, I and I so notify the Diocesan Office, Department, Parish, or Schehld/youth (i.e., name, likeness, and/to photographic image) we that web page references and web page photographic images we days of the written notification. [I understand that the Diocesan School is not responsible for access to the internet information the web prior to this removal of web references (i.e., name, like image).] I further understand that my child's/youth's name, like imay continue to be used in any publication already printed or p the consent provided herein.	iool in writing, all references to my rill no longer be used. I understand rill be removed within thirty (30) in Office, Department, Parish, or or downloads made by users using eness, and/or photographic teness, and/or photographic image.
Name of Child (Please Print)	Date of Birth .
Signature of Parent or Legal Guardian	Date
This Authorization Form to be kept on file until the student	graduates form High School.