



Archdiocese of Seattle

Photograph, Video/Sound and Image of Work Consent

Date: _____

From time to time, photographs and video/sound may be taken of youth ministry/parish/school events and gatherings. This may also apply to written composition or visual art (images of work).

_____ (name of organization) would like to be able to use these photographs, videos/sounds and images of work for flyers, parish and diocesan publications, and the parish website. Written consent by the parent/guardian is required. If names are used, youths will only be identified by first names. If there are concerns about photographs, videos/sounds or images of work posted on the website, please contact _____ (name of Organization) and they will promptly be removed.

I, the parent/guardian of _____ (name of youth) authorize and give full consent, without limitation or reservation, to _____ (name of organization) to publish any photograph, video/sound or image of work in which the above named youth appears while participating in any program associated with _____ (name of organization). There will be no compensation for use of any photograph, video/sound or image of work at the time of publication or in the future.

If the youth and/or parent/guardian wish to rescind this agreement they may do so at any time with written notice.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

If you choose **electronic signature**: Enter name into the text box to acknowledge you have read and accept the waiver:

By checking this box, you agree electronically that you have read, understood and agreed to the waiver(s) above. You also are 18 or older or have the authority to agree to the waiver(s) for the participant as parent or legal guardian. By registering a child under 13, you are consenting to the collection of the child's information that you are providing for the purposes of the waiver

Date: _____

I do not give permission to publish any photograph, video/sound or image of work of my child

Child's Name: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

If you choose **electronic signature**: Enter name into the text box to acknowledge you have read and accept the waiver:

By checking this box, you agree electronically that you have read, understood and agreed to the waiver(s) above. You also are 18 or older or have the authority to agree to the waiver(s) for the participant as parent or legal guardian. By registering a child under 13, you are consenting to the collection of the child's information that you are providing for the purposes of the waiver

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