## To Be Returned to School

## Live Streaming Release Form

I, \_\_\_\_\_\_\_\_\_ hereby give the Archdiocese of Philadelphia, its successors and assigns and those acting with its authority, the unqualified right and permission to reproduce, copyright, publish, circulate or otherwise use any live streaming of my child(ren) produced by the Archdiocese of Philadelphia. This authorization and release covers the use of said school pictures in any published form and any media of advertising publicity.

I also understand that our school may be identified by name and I fully understand that this is a complete release of all claims against the Archdiocese of Philadelphia or any other person, firm or corporation by reason of any such use of school pictures.

I hereby warrant that I am free to give this permission. I further warrant that the information I have provided is, to the best of my knowledge, true and accurate.

Signature of Parent/Guardian	Date
Children's name (first and last, please pri	nt)
Street Address	
City, State, Zip	
Telephone	

Signature of Principal