



PHOTO-VIDEO RELEASE

To Whom It May Concern:

I hereby give permission _____ I do not give permission _____
for my son/daughter to be photographed or videotaped at St. Michael School. I
realize that the photo may be published in the newspaper, a magazine, the
school website or other publication. The video may be used for informational or
educational purposes regarding the programs or curriculum at St. Michael
School.

Parent/Guardian: _____
(Please Print)

Signed: _____

Date: _____