EVENT - PHOTOGRAPHY RELEASE AUTHORIZATION

R-30

Release for Diocesan Production for the Diocese of Fresno (DOF) and all Entities for the Diocese of Fresno (DOF)

Parents / Guardians: This form must be completed in order for your child to participate in this event or function. Please

respond accordingly to the authorized document.	use of your child's	photograph or video	mage in a DOF produced publ	ic-relations
NAME OF PARISH OR SCHOOL		NAME OF GROUP		
NAME OF EVENT			DATE OF EVENT	
PARTICIPANT AGREEMENT:				
I hereby grant the Diocese of Fres successors full authorization and the publish photographic reproductions, pay be included in whole, in part, or i any other picture, product, person, no elsewhere, for art, advertising, comme	e absolute right and portraits, or pictures in composite, or in v ame or reproduction	d permission to sell, s of me, motion pictu which character or fo n, in color or otherwi	assign, convey, reproduce, control or video tape pictures of more is distorted, in conjunction se, made through any media	opyright, use one, or in which with my own o
I hereby waive any right I may have to connection therewith, or the use to wh		·	t or the advertising copy that	may be used ir
I hereby release, discharge and agree or others for whom they are acting from intentional or otherwise, or from any oprocessing tending towards the comp for its purpose of subjecting me to con	om any liability of a change that may oc pletion of the finishe	any nature or descript ocur or be produced it ed product, unless it c	ion by virtue of any use whats n the taking of said picture or an be shown that said use or	soever, whethe pictures, or any
PRINT NAME OF PARTICIPANT		SIGNATURE OF PARTICIPANT		
ADDRESS				
TELEPHONE		EMAIL		
PARENT / GUARDIAN AUTHO	RIZATION FOR	A MINOR		
If the participant is under 18 years of information and must check one of th			above participant must provide	e the following
As the parent and/or legal guardian of the above named participant, I do hereby consent and grant my permission to all of the foregoing.	give my co will be the re participating taken, then	ensent for my child the sponsibility of the page in any posed picture. I agree to review the ler to identify my child	an of the above named partici to be photographed, but I und articipant to make every effort es. If a picture or pictures are photographs or video within to d to avoid any reproduction or	erstand that it possible from e inadvertently the given time
PRINT NAME OF PARENT / GUARDIAN		SIGNATURE OF PARENT / GUARDIAN		
SIGNATURE OF WITNESS		DATE		

2024-2025