

## PHOTO-VIDEO RELEASE FORM

To Whom It May Concern:

I hereby give permission for my son/daughter

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to be photographed or videotaped while a student at Holy Souls 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 Holy Souls School.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Return to the school office by July 25, 2009.