



SAINTS of All Saints Club

Students **A**ppreciating & **I**lluminating the **N**ew **T**estament & **S**acraments

Parish of All Saints Spiritual Center
621 Dock Street Millville, NJ
saintsclub@theparishofallsaints.org

PHOTO RELEASE FORM

I/We **DO** give permission to have my child's/our children's photograph taken during activities/events associated with the **SAINTS** of All Saints Club and to be used by the **SAINTS** of All Saints Club and/or the Parish of All Saints to promote and share our middle and high school youth ministry via these photos on the parish website, church bulletin, club flyers and/or social media outlets:

NAME: _____ AGE & GRADE:: _____

NAME: _____ AGE & GRADE:: _____

OR

I/We **do NOT** give permission to have my child's/our children's photograph taken or used during activities/events associated with the **SAINTS** of All Saints Club :

NAME: _____ AGE & GRADE:: _____

NAME: _____ AGE & GRADE:: _____

Parent/Guardian SIGNATURE(s): _____

Parent/Guardian CONTACT INFO:: _____

DATE: _____