

Our Lady of Victories Jersey City Church Youth Ministry Photography Consent Form

I _____ (Parent/Guardian Name), hereby give authorization to the Our Lady of Victories Jersey City Church, New Jersey, to be able to use _____'s (Teens Name) name and likeness in photographs taken during any Special event or occasion on Holy Masses, for use including, but not limited to, the Our Lady of Victories Jersey City Church, print, video, online and electronic promotional materials.

I hereby release and hold harmless the Our Lady of Victories Jersey City Church & the Archdiocese of Newark from any reasonable expectation of privacy or confidentiality associated with the images specified above. I acknowledge that since my daughter's/son's participation with this program is voluntary, he/she will receive no financial compensation. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby irrevocably authorize the Our Lady of Victories Jersey City Church and the Archdiocese of Newark to edit, copy, exhibit, publish or distribute this photo for purposes of publicizing the organization's programs or for other related, lawful purposes. I waive the right to inspect or approve the finished product, including written or electronic copy, wherein the student's likeness appears.

I hereby release the Our Lady of Victories Jersey City Church and the Archdiocese of Newark, its contractors, its employees, and any third parties involved in the creation or publication of marketing materials, from liability for any claims by me or any third party in connection with participation in this program.

Authorization:

Student's Name: _____

Signature: _____

Parent/Guardian Name: _____

Parent/Guardian Signature: _____ (if student is under 18 years of age)

Street Address: _____

City: _____ State: _____ Zip: _____

Tel. # _____ E-mail: _____

