## **Photo Release:**

I hereby give Queen of Apostles Parish permission to use photographs taken during Faith Formation classes, events, and children's liturgies of my child in all forms and media, and in all matters including composite representation for lawful purposes.	
Signature of Parent or Guardian	
OPT OUT:	
I do <b>NOT</b> give permission for my child's photo to	be used.
Signature of Parent or Guardian	Date