Minor Model Release

	the receipt and sufficiency of which are hereby hereby give to The Diocese of Rochester.
Diocese is acting, and those acting with its a	hereby give to The Diocese of Rochester ensees, successors and assigns, those for whom the authority and permission (collectively, the "Authorized entering the collective state of the collective sta
Parties"), the unrestricted right and permissivideo and photographic images or picture	ion to copyright and use, re-use, publish and republishes of
who is my minor child, or such video and child may be included intact or in part, or restriction as to changes or transformations fictitious name, or reproduction thereof in co or hereafter known for purposes of illustrations	photographic images or pictures in which my minor composite or distorted in character or form, without s ("Images") in conjunction with my child's own or a olor or otherwise, made through any and all media now on, art, promotion, advertising, trade, sale or any other herein is hereby acknowledged to constitute written
I also permit the use of any printed material	l in connection therewith.
completed video, images, pictures or prod	y minor child, may have to examine or approve the ucts (regardless of the form in which produced), the erewith, or the use to which it may be applied.
harmless the Diocese and each of the Autarising by virtue of any blurring, distortion whether intentional or otherwise, that may any subsequent processing thereof, as well a	ninor child, hereby release, discharge and agree to save horized Parties from any liability, costs or expenses a, alteration, optical illusion, or use in composite form occur or be produced in the taking of the Images or in as any publication thereof, including without limitation of privacy, violation of New York Civil Rights Law rights.
and my minor child. I have read the abo	jority and have the right to contract on behalf of myself ve authorization, release and agreement, prior to its hereof. This agreement shall be binding upon me, my s and assigns thereof.
Signed:	Date:
Address:	Phone:
City:	State/Zip:
Witness:	Student Name:
Teacher:	-

SkS Saint Kateri School