|  |
| --- |
| **Name of Child** BLOCK CAPITALS PLEASE |
| Surname: | Christian Names:Boy *Please tick*Girl |
| Address |  |
| email |  |
| Telephone Numbers  | Home: | Mobile: |
| Date of Birth |  |
| Date of Baptism |  |
| Parish of Baptism |  |
| School attended fromSeptember 2022 |  | Year Group: |
| Name of Mother |  | Religion: Please specify which denomination (if not Catholic) |
| Name of Father |  | Religion: Please specify which denomination (if not Catholic) |
| Signature of parent |  |

**Consent Form for Taking Pictures at Church and Putting Them on the Church’s Website**

Photo Release Form.

I/we hereby grant permission to St. Wilfrid’s Church, to use my child / children’s photos on its Web site or in other official church printed publications without further consideration.

 I/we acknowledge the church has the right to crop or treat the photograph(s) at its discretion.

 I/we also acknowledge that the church may choose not to use my photograph(s) at this time, but may do so at its own discretion at a later date from the date of when the photograph was taken.

 I/we also understand that once my image is posted on the church’s website, the image can be downloaded by any computer user, anywhere in the world. Therefore, I agree to indemnify and hold harmless the church, its priests, deacons, its members and designees from any claims arising out of the use of the photograph(s).

The church reserves the right to discontinue use of any photograph(s) without notice.

 I/ we hereby give permission / don’t give permission (Please delete as appropriate) to use any still and/or moving image being video footage, photographs and/or frames and/or audio footage depicting my/our children named below.

Name of Parent/Guardian…………………………………………………………………………………..

Signed……………………………………….... Date……………………………