



Holy Family ECC Authorization to pick up & Media release

Student Name _____ Age _____ DOB _____ Class _____

List all known Allergies / conditions _____

For your child's protection, please list the names of persons authorized to take your child from school. Please inform the authorized persons to be prepared to identify themselves to our staff. Include yourself (person who is signing the form) and any other persons authorized to pick up. If any of this information changes, be sure to notify the office and/or the teacher immediately. Parents must send written notification of a temporary change on a particular day. i.e. students visiting other student's homes after school. Students will not be released to non-authorized persons. In the event that this is attempted, efforts will be made to contact the person signing this form. However, if this person is unreachable, students will be kept at the extended school day program at the parent's expense.

NAME: _____	Relationship to the Child _____	Phone # _____
NAME: _____	Relationship to the Child _____	Phone # _____
NAME: _____	Relationship to the Child _____	Phone # _____
NAME: _____	Relationship to the Child _____	Phone # _____

LIST PERSONS THAT YOU DO NOT WANT TO PICK UP YOUR CHILD (If applicable)

Proper documentation is on file in office: _____

During the school year, Holy Family Catholic School/ECC may participate in the recorded, edited, reproduced, and distributed audio, video, or still imaging recordings that involve the use of students' names, likenesses and/or voices. Such productions may be used for educational or exhibition purposes by Holy Family Catholic School/ECC and the Diocese of St Petersburg in perpetuity and may be copied, copyrighted, edited and distributed by Holy Family Catholic School/ECC and the Diocese in perpetuity unless said consent is revoked in writing.

News media, including representatives of television, radio, newspapers and magazines, also often are permitted on school property and may take notes, still photos, sound recordings and/or moving pictures that may include your child. These items may appear or be used in news or feature stories by any media format. You have the right to object to the use of your child's name, likeness and/or voice in these productions and may do so by completing the form below and returning it to the Administrator of, Holy Family Catholic School/ECC. If you have any questions, please contact the school office at: 727-525-8489.

Please circle one answer for each question:

YES / NO I / We I/We give permission for my child(ren) names or photos to be published in school ads, newspapers, any print forms, Internet and electronic mailings, and / or radio, television, or media seen by the public.

YES / NO- I/ We give permission for my child(ren) names or photos to be published in **School Yearbook**.
(This is the only exception from the above)

SIGNATURES OF BOTH PARENTS ARE REQUIRED. Exceptions are single parents, deceased parents or cases where one parent has sole legal custody. Sign the form on the first line. Non-custodial parents (or those who share custody) who have regular visitation must also sign.

Parent/Guardian _____ Parent Guardian _____