ACADEMY OF OUR LADY OF MOUNT CARMEL

PHOTOGRAPHY/VIDEOGRAPHY CONSENT FORM FOR USE BY SCHOOLS AND FOR SUBMISSIONS TO THE ARCHDIOCESE OF NEWARK

Dear Parents,

Throughout the school year, pictures are taken of students at various events. This is a release form allowing us to submit these photos to various media such as newspapers, publications and the OLMC website. Please read the form carefully, sign and return it no later than **Friday**, **September 8**, **2023**. Your cooperation is greatly appreciated.

Check the appropriate box and complete said section.

□ Minor (anyone under 18 years of age)

l,	(Parent/Guardian Name), hereby authorize Academy of Our Lady of Mount Carmel,
10 County Road, Tenafly, NJ and the Roman C	Catholic Archdiocese of Newark (the "Archdiocese"), 171 Clifton Avenue, Newark, New
Jersey, to use	's (Minor's Name) name and likeness in any photograph(s)/video(s). I
agree to have my photograph(s)/video(s) take	n and kept on file by the School and the Archdiocese. I understand and agree that any
photograph(s)/video(s) shall exclusively be th	e property of, and the right, title, and interest of the School and the Archdiocese, for
use including, but not limited to, the School	's and the Archdiocese's print, video, online, and electronic promotional materials. I
further agree and acknowledge that the Scho	ol and the Archdiocese have made no representation or promise to me regarding the
quality or editing of any photograph(s)/video(s	s) taken. I hereby release and hold harmless the School and the Archdiocese from any
reasonable expectation of privacy or confider	itiality associated with the images specified above. I acknowledge and agree that the
minor's participation is voluntary; he/she will	receive no financial compensation. I acknowledge and agree that publication of said
photograph(s)/video(s) confers no rights of c	ownership or royalties whatsoever. I hereby irrevocably authorize the School and the
Archdiocese to edit, copy, exhibit, publish or	distribute any photograph(s)/video(s) for purposes of publicizing the School's and the
Archdiocese's programs or for any other re	lated, lawful purpose. I waive the right to inspect or approve the finished product,
including written or electronic copy, wherein t	he minor's likeness appears. I grant to the School and the Archdiocese permission to
publish the minor's name and use the minor's	likeness from the photograph(s)/video(s) taken. This permission extends to the School
and the Archdiocese and any subsequent par	ty that the School or the Archdiocese may designate that is involved in the production,
reproduction, and distribution of the photogra	ph(s)/video(s). I hereby release and hold harmless the School, the Archdiocese, their
respective contractors and employees, and	any related third parties from all actions, claims, damages, costs, and/or expenses,
including attorney's fees, brought by myself,	the minor, and/or the parent/guardian, which relate to, or arise out of, any use of the
photograph(s)/video(s) as specified above. I I	nave read the above terms and conditions contained in this consent. I understand the
contents of this consent and that I am waiving	and relinquishing all rights that I may have as set forth above.

.....

□ Adult (minimum of 18 years of age)

I,hereby authorize Academy of Our Lady of Mount Carmel, 10 County Road, Tenafly, NJ an
the Roman Catholic Archdiocese of Newark, 171 Clifton Avenue, Newark, New Jersey, to use my name and likeness in an
photograph(s)/video(s). I agree to have my photograph(s)/video taken and kept on file by the School and the Archdiocese.
understand and agree that any photograph(s)/video(s) shall exclusively be the property of, and the right, title, and interest of the
School and the Archdiocese, for use including, but not limited to, the School's and the Archdiocese's print, video, online, an
electronic promotional materials. I further agree and acknowledge that the School and the Archdiocese have made n
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harmless the School and the Archdiocese from any reasonable expectation of privacy or confidentiality associated with the image
specified above. I acknowledge and agree that my participation is voluntary and that I will receive no financial compensation.
acknowledge and agree that publication of said photograph(s)/video(s) confers no rights of ownership or royalties whatsoever.
hereby irrevocably authorize the School and the Archdiocese to edit, copy, exhibit, publish or distribute any photograph(s)/video(s
for purposes of publicizing the School's and the Archdiocese's programs or for any other related, lawful purpose. I waive the right to
inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. I grant to the School and
$the \ Archdiocese \ permission \ to \ publish \ my \ name \ and \ likeness \ from \ the \ photograph (s)/video (s) \ taken. \ This \ permission \ extends \ to \ the \ taken \ the \ taken \$
School and the Archdiocese and any subsequent party that the School and the Archdiocese may designate that is involved in the
production, reproduction, and distribution of the photograph(s)/video(s). I hereby release and hold harmless the School, the
Archdiocese, their respective contractors and employees, and any related third parties from all actions, claims, damages, costs
and/or expenses, including attorney's fees, which relate to, or arise out of, any use of the photograph(s)/video(s) as specified above
I have read the above terms and conditions contained in this consent. I understand the contents of this consent and that I are
waiving and relinquishing all rights that I may have as set forth above.

_____NO, I DO NOT WANT MY CHILD/CHILDREN PHOTOGRAPHED.

Child's Name			_ Grade _	
Child's Name			_ Grade _.	
Child's Name			_ Grade _.	
Parent/Guardian Name:				
Parent/Guardian Signature:				Date:
Street Address:		 		
City:	_ State:	_ Zip:		
Tel. #	E-mail:			

Please sign and return this form no later than Friday, September 8, 2023.