



St. Augustine

CATHOLIC SCHOOL

A NOTRE DAME ACE ACADEMY

MEDIA CONSENT AND RELEASE FORM

2025-2026 SCHOOL YEAR

I (We) the parent(s) and/or guardian(s) of the minor child identified below hereby grant St. Augustine School ("School") and/or its agents consent to record (in writing or otherwise), photograph, audiotape, or videotape my minor child's name, image, likeness, spoken words, schoolwork or school projects, in any form, and to display, release, exhibit, publish, or distribute the same, or any part thereof, for any lawful School use or purpose including, without limitation, use on the School's bulletin boards, websites, social media sites, print and electronic media, marketing publications, public relations and communications materials and/or presentations, and any other uses as may not be contemplated herein, without further notice or compensation as follows:

I consent.

I do not consent.

I further understand that by entering into this informed consent and release, and by granting permission as stated herein, I hereby release the School, affiliated parishes, the Diocese of Cleveland, the Bishop of Cleveland, and their respective officers, directors, agents, employees and/or attorneys from and against any and all liability, loss, damage, costs, claims, and/or causes of action arising out of or related to the above items to which I have consented.

I further understand that the School and its respective officers, directors, agents, employees and/or attorneys have no control over use of photographs, videotapes, audiotapes, or other records made by others and/or outside the scope of this consent and release.

Finally, in signing below I acknowledge that all recordings, audiotape, videotape, photographic proofs, photographic negatives, positives, and prints created pursuant to this Release shall constitute the sole property of the School.

Name of Minor Student (please print)

Signature of Parent(s) or Legal Guardian(s)

Printed Name of Parent or Legal Guardian

Date

Residing at:
