

PHOTO RELEASE CONSENT FORM (CHILD) MINOR

**First Holy Communion**

**at Our Lady of the Annunciation Church, Addiscombe**

**Saturday 13th of May at 11:30 am. Saturday 13th of May at 15:00 pm  
& Sunday 14th of May at 11:30 am.**

I, \_\_\_\_\_ the parent / legal  
guardian of \_\_\_\_\_ [Child]

grant Emmanuel Muscat - **emmanuel.photography** my permission to use and make  
photographs described during the **First Holy Communion** [Describe Photographs] for the  
services, including but not limited to: copyright purposes.

Furthermore, I understand that no royalty fee or other compensation shall become payable  
to me by reason of such use.

**Parent/Guardian's Signature:** \_\_\_\_\_ **Date** \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Select below the date and time of Mass.

<b>Saturday 13th 11:30</b>	<b>Saturday 13th 15:00</b>	<b>Sunday 14th 11:30</b>
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The parent or guardian name.

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Child's name.

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Contact number.

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An e-mail address is needed for access to photo galleries and communications.

e-mail address.

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Please note this form can not be valid if the consent form on the reverse side is not completed.

**Office use only-**

<b>MINOR (CHILD) PHOTO RELEASE FORM</b>	<b>Yes</b>	<b>No</b>
<b>Photography Consent is given?</b>	<b>Yes</b>	<b>No</b>