**St. James Lutheran School**

**Howard Lake, MN**

**Picture Release**

**I,\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  hereby **DO DO NOT (*circle one*)** give

My consent to let my child/children be photographed for the exclusive purpose of school promotion in brochures, photo display, newsletters, newspaper, yearbook, facebook or other social media, etc.

This form will remain on file until we receive different instructions from you.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent/guardian Date