



St. Luke Roman Catholic Parish

Print Name of Child: _____

I hereby grant my consent to use and release to: The Catholic Diocese of Phoenix and St. Luke Roman Catholic Church the use of my minor child's photo for the 2024-2025 Religious Education Program year, without limitations or reservations of any fee. The photos may be used for a slide show, the parish calendar, bulletin, web site or Facebook. No names will be printed.

Print Parent/ Guardian Name: _____

Parent/ Guardian Signature: _____ Date: _____