



PHOTOGRAPH PERMISSION FORM

Subject: Central Catholic Summer Enrichment Program (BAM)

Location: Central Catholic High School

I grant to Central Catholic High School, its representatives and employees the right to take photographs of my son in connection with the Central Catholic Summer Enrichment Program (BAM). I authorize Central Catholic High School, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Central Catholic High School may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Student Name _____

Parent/Guardian Printed Name _____

Signature of Parent/Guardian _____

Date _____

_____ It is my request that my son not be photographed during the BAM Summer Enrichment Program.