



Family Publicity Release Form

Authorization

Permission is hereby granted to the Department of Catholic Schools of the Diocese of Pittsburgh and Saint Joseph High School to use recordings, photographs, video, written material, and quotations of:

Student Name (printed) _____

To assist in its community awareness, educational efforts, and related public relations purposes. In exchange for the opportunity to participate in the endeavors of the Department of Catholic Schools of the Diocese of Pittsburgh and Saint Joseph High School, I hereby agree to indemnify and hold harmless the Department of Catholic Schools of the Diocese of Pittsburgh, the Diocese of Pittsburgh, and Saint Joseph High School, their agents, servants and employees from any and all claims, demands, and/or causes of action of whatever kind or nature arising from the use of voice recordings, photographs, video, written material, and quotations.

I further agree that I waive any right for compensation, fee, or royalty for aforesaid materials.

Date: _____

Signature of Student

Signature of Parent/ Guardian if Minor

Relationship

Address _____

City _____ State _____ Zip _____