PHOTO/VIDEO RELEASE FORM

Dear Parents:

At RCCA, we highly value the opportunity to including photographs, digital images, and verthe work of the school and enhancing the materials, we kindly request you consent by	ideos. These visual representations play a ceducational environment. In order to incl	rucial role in promoting
Student Name:	Grade:	
I, the undersigned parent/guardian, hereby photographs, digital images, and video footages.		ristian Academy to use
2. Website: I consent to the display	usion of my child's images in RCCA's print of my child's images on the official school the sharing of my child's images on the scho	website.
I understand that these images will be us achievements of RCCA.	sed for educational purposes and to pror	mote the activities and
I acknowledge that my child's identity will bimage.	be protected, and their full name will not be	included alongside any
Yes, I do give my consent on the above.		
Signature:	Printed Name:	Date:
No, I do not give my consent on the above.		
Signature:	Printed Name:	Date: