



St. Jude Catholic Church
92-455 Makakilo Drive • Kapolei, HI 96707
Phone: 808-672-8669 (Fax) 808-672-3779

PHOTO RELEASE FORM

I grant permission to St. Jude Catholic Church and its employees to use photographs taken of me or of _____ for use on the St. Jude Catholic Church Web site
(Print name)

or other electronic forms of media, and to offer them for use or distribution in other non-parish publications (i.e. Hawaii Catholic Herald), without notifying me. Furthermore, I authorize the use of my name for purposes deemed appropriate and necessary by St. Jude Catholic Church.

I hereby waive any right to inspect or approve the finished photographs or printed or electronic matter that may be used in conjunction with them now or in the future, whether that use is known to me or unknown.

I hereby agree to release, defend, and hold harmless St. Jude Catholic Church, including any firm publishing and/or distributing the finished product in whole or in part, whether on paper, or via electronic media, from and against any claims, damages, or liability arising from or related to the use of the photographs, including but not limited to any misuse, distortion, blurring, alteration, or use in composite form, either intentionally or otherwise, that may occur or be produced in taking, processing, reduction, or production of the finished product, its publication, or distribution.

I am 18 years of age or older and I am competent to contract in my own name. I have read this release before signing below, and I fully understand the contents, meaning, and impact of this release. I understand that I am free to address any specific questions regarding this release by submitting those questions in writing prior to signing, and I agree that my failure to do so will be interpreted as a free and knowledgeable acceptance of the terms of this release.

Full Name (please print)

Signature

Signature of guardian
(If under 18 years of age)

Date