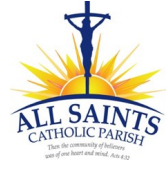


AUTHORIZED DRIVERS FORM (2017-2018 school year)



Student Name _____ Grade _____ Student Name _____ Grade _____
 Student Name _____ Grade _____ Student Name _____ Grade _____

The following individuals have my (our) permission to drive my son/daughter home following a faith formation activity.

Name	Relationship to child	Name	Relationship to child
1.		3.	
2.		4.	

I will instruct my child regarding the persons with whom they may leave the building after Faith Formation, Youth, REDD or any activity while in the care of All Saints Parish catechists and personnel. If my child has any doubt or concern about leaving with a person, my child will speak to a catechist, the Catechetical Leader, or a trusted adult and may call me (parent) if necessary.

TO AMEND THIS LIST AT ANY TIME, CONTACT OUR PROGRAM COORDINATOR.

Parent Signature: _____ Date: _____

All Saints Parish Media Prelease Form

In the All Saints Parish Sr. and Jr High Youth, Faith Formation and REDD programs, held at the All Saints Parish Alpena churches (St. Anne, St. Bernard, St. John and St. Mary), we sometimes promote the accomplishments of our students and our teachers, whether it be through a class project, artwork, or other such events. We may utilize a variety of communications strategies to share these positive events through newsletters, brochures, church bulletins, and other printed materials, photographs, press releases, interviews with area media, church and diocesan websites, video presentations, etc. Below is a release form for these purposes.

MEDIA RELATIONS/PROMOTIONS RELEASE

Name(s) _____

Address _____

Street City State Zip

Phone: _____

Release

**IF PERSON BEING USED IN THE MATERIAL IS UNDER 18 YEARS OF AGE,
 PARENTS OR LEGAL GUARDIAN MUST SIGN THIS FORM.**

I/We give to All Saints Parish of Alpena consisting of the churches of St. Anne, St. Bernard, St. John the Baptist and St. Mary in the city of Alpena MI, my/our permission to use my name or my child's name, and/or photograph, videotape, website photo, or any likeness for publicity purposes and the use of statements made by or attributed to me or my child relating to All Saints Parish of Alpena and the Catholic Diocese of Gaylord for promotions and granted any and all rights to said use without further compensation. It is my/our understanding that my signature below releases All Saints Parish of Alpena (St. Anne, St. Bernard, St John the Baptist, St. Mary churches) and the Catholic Diocese of Gaylord from any financial or legal responsibility for the use of these media relations/promotional materials.

I also certify that I am the parent/legal guardian of the person named at the top of this form.

Signed: _____ Date: _____

Permission Granted