



THE DIOCESE OF SPRINGFIELD-GIRARDEAU

Guidelines for Interactions through Technology

PLEASE PRINT

Employee Name:

Last

First

Middle Initial

Job Title:

Central Office/Parish/School/Diocese/Affiliate

Verification Statement

I verify that I have read and understand this policy. I agree to abide by this policy and also understand that the Diocese of Springfield-Cape Girardeau Agency/Parish/School may amend or change the policy at its discretion without notice.

Employee Signature

Date

Return signed form to employer



THE DIOCESE OF SPRINGFIELD-GIRARDEAU

Social Media Release

Dear Parent/Guardian,

Below you will find a social media release allowing the use of audio/video/photographs of your child on a diocesan/parish/school social media site. Please fill in the blanks, sign, and return to the parish and/or school.

You may wish to make a copy for your records.

I, _____ give my permission for photographs/audio/videos of _____ to be used for the purposes of a social media posting on the school/diocesan/parish social media site _____ to cover the subject of _____ on this date _____ .

I understand this posting will be unlisted, deleted within ___ days and will not be archived. I also understand the viral nature of social media.

I understand that any photograph/audio/video will be used only in a legal manner and that at no time will my child or I be depicted in any unethical way.

Parish and/or School Name

City

Parent Name (Please Print)

Parent Signature

Date



THE DIOCESE OF SPRINGFIELD-GIRARDEAU

Multi-Media Release

Dear Parent/Guardian,

Below you will find a media release allowing the use of photo/video of your child in diocesan/parish/school materials and campaigns as well as other media initiatives; i.e.: newsletter, Websites, fund development efforts, grant requests, video/DVD/Powerpoint, newspapers, and television. Please fill in the blanks, sign, and return to the parish and/or school.

You may wish to make a copy for your records.

I, _____ give my permission for photographs/videos of, _____ to be used for the purposes of _____ .

I understand that any photographs/videos will be used only in a legal manner and that at no time will my child or I be depicted in any unethical way.

Parish and/or School Name

City

Parent Name (Please Print)

Parent Signature

Date

NOTE: This release does not cover any social media initiative; social media postings require a separate release.