



Permission Form TOTUS TUUS 2010



NAME OF PARENTS/GUARDIANS _____

TELEPHONE: ADDRESS:
Home _____

Cell _____

Work _____

Children being enrolled in TOTUS TUUS and their grade level for the **2010-2011** school year:

NAME	GRADE	MEDICAL INFO TO BE AWARE OF
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Catholic Diocese of Kansas City-St. Joseph Permission to Publish

In an attempt to share information concerning the outstanding accomplishments of our youth, we will write articles, produce videos, and provide pictures for publication in various media, including the Totus Tuus and diocesan Internet websites, an independently produced DVD, and the Catholic Advance. To include your child and his/her work in this publicity, we must have your written permission. You have the right to revoke permission at any time.

Please Check Below:

_____ I grant permission to the Diocese of Kansas City-St. Joseph and Totus Tuus to use the pictures and video of my child/children in positive media presentations.

_____ I DO NOT grant permission to the Diocese of Kansas City-St. Joseph and Totus Tuus to use the pictures and video of my child/children in positive media presentations.

Signature of Parent/Guardian

Date