

**CHURCH OF ST. JOSEPH CERTIFICATION, ACKNOWLEDGEMENT AND AUTHORIZATION FOR CONSENT  
AND RELEASE FORM FOR SOCIAL MEDIA  
OR OTHER ELECTRONIC COMMUNICATION INVOLVING MINORS**

I am the parent or legal guardian of \_\_\_\_\_ (full name of minor) (“My Child”).

I certify that My Child is at least 13 years old.

I have been made aware of the Church of St. Joseph Acceptable Use Policy for Electronic Communication and the Social Media Policy of Church of St. Joseph

I authorize staff or other leaders of St. Joseph to communicate with My Child electronically, including via social media, in accordance with the Acceptable Use Policy for Electronic Communication.

I acknowledge that to review or receive public communications shared via social media with My Child, I would need to become a fan or follower of the same social media. I understand that communications may be accessible or viewable by others who are also fans or followers of the same social media. I also acknowledge that, in accordance with the Acceptable Use Policy for Electronic Communication and the Social Media Guidelines, if any Staff or Leader knowingly communicates privately with a minor as a part of his or her duties for or on behalf of the Church of St. Joseph reasonable steps must be taken to send the minor’s parent/guardian the same communication content, not necessarily via the same technology.

I authorize and consent that Church of St. Joseph and the Archdiocese of Saint Paul and Minneapolis be permitted to use and publish for general communications, advertising, commercial or publicity purposes, the likeness of my child and my child’s original work or for any other lawful purpose whatsoever, including video, photographic portraits, pictures, reproductions, made through any medium, including social or other electronic media, in accordance with the Acceptable Use Policy for Electronic Communication and the Social Media Guidelines. I release Church of St. Joseph, the Archdiocese of Saint Paul and Minneapolis, or anyone authorized by Church of St. Joseph or Archdiocese of Saint Paul and Minneapolis with such use.

This consent is valid for one year.

If I choose to rescind my consent to the authorization, I agree that I will inform Church of St. Joseph in writing and that my rescission will not take effect until it is received by Church of St. Joseph, I understand however that it may not be possible to recall any work or photos that have been published prior to receipt of my written rescission.

I have read this certification, acknowledgement and release, have had the opportunity to consider its terms, and understand it. I execute it voluntarily and with knowledge of its significance.

Parent/ Guardian Name (please print): \_\_\_\_\_

Email address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_