

# PERMISSION TO PUBLISH

**SAINT THOMAS MORE SCHOOL**  
**50 Thomas More Way, San Francisco, CA 94132 (415) 337-0100**  
**www.stthomasmoreschool.org**

I give permission for my child's photo to be published in St. Thomas More School's and/or Preschool publications, including but not limited to newsletters, school newspapers, class blogs, or our website to highlight their accomplishments or promote publicity for the school. Under no circumstances will a child's name, home address, or phone number be published.

Name of Student: \_\_\_\_\_

\_\_\_\_\_ Yes, I give permission.

\_\_\_\_\_ No, I do not give permission.

\_\_\_\_\_  
Parent/Guardian Name (Print)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Name (Print)

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

*While being sensitive to single parent situations and possible embarrassment to the children, signatures of both parents should be obtained when possible.*