

DIocese of San Jose Consent and Release Form – Virtual Media for Youth

Date: _____

Dear Parent or Legal Guardian,

To serve the youth of _____ ministry in the parish of _____ in the Diocese of San Jose
Ministry Parish
during the State’s Shelter in Place Orders, the _____ Program.

Program is providing virtual programming and content for its participants, through which staff will facilitate program activities through online platforms. The Program will use software, tools and applications provided by third-parties that participants, parents/legal guardians and/or staff will access via the internet and use for purposes of communication and programming and potential content creation. These platforms may include but are not limited to: Facebook, Instagram, Twitter, YouTube, TikTok, GoToMeeting, and Zoom.

This Form provides your consent and release for your child to participate in the Program and utilize these online applications for distance-based, virtual program purposes. Please be aware that each application collects different information about its users and has its own privacy terms and conditions to which members must adhere and which Parish cannot control or assume responsibility. Please review these carefully before registering your child.

Our commitment to keeping the young people we serve safe is always our number one priority. To that end, we will actively monitor participant activity. All online activities contemplated hereunder must also comply with the Diocese of San Jose Safe Environment and Technology Policies including the Code of Conduct guidelines and the Diocesan Social Media policy.

Below, please find your AUTHORIZATION, CONSENT AND RELEASE FOR SOCIAL MEDIA OR OTHER ELECTRONIC COMMUNICATION INVOLVING MINORS FORM.

I, _____, am the parent or legal guardian of _____.
Full Name of Parent/Legal Guardian Full Name of Minor

I have received and reviewed the Diocese of San Jose Safe Environment and Technology Policies including the Code of Conduct guidelines and the Diocesan Social Media policy.

I understand that I will have access to everything provided to my child and be made aware of how social media is being used, be told how to access the sites, and be given the opportunity to be copied on all material sent to my child via social networking (including text messages).

I authorize and consent to staff or other leaders of the Parish to communicate with my Child electronically, including via social media, text, email and phone in accordance with the Program.

I understand that if any staff or other leaders knowingly communicate privately with my child as a part of his or her duties for or on behalf of above-named school-parish, reasonable steps will be taken to send to me the same communication content, though not necessarily via the same technology.

I acknowledge that to review or receive public communications shared via social media with my Child, I will need to become a fan or follower of the same social media. I understand that communications or posts may be accessible or viewable by others who are also fans or followers of the same social media.

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I understand that without this consent my child will not be able to participate in the Program.

If I choose to rescind my authorization and consent provided herein, I agree that I will inform the Parish in writing and that my rescission will not take effect until it is acknowledged by the Parish.

I understand, however, that it may not be possible to recall any work, photos or videos that have been published as part of the Program prior to receipt of my written rescission.

I have read this Consent and Release Form and have had the opportunity to consider its terms and understand them. I verify that I have read and voluntarily agree to the terms and conditions of the Consent and Release Form – Virtual Media for Youth from the Diocese of San Jose.

I further hereby hold harmless, release and forever discharge the Diocese of San Jose and its employees, agents, licensees and legal representatives from, and shall indemnify them against, all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators or any other person(s) acting on my behalf or on behalf of my estate have or may have by reason of my Child's participation in the Program and through my authorization, consent and release herein.

I have read this Consent and Release Form, I fully understand it, and I voluntarily agree to be bound by its terms. I represent and certify that I am the parent or legal guardian of the minor.

I Agree Yes _____ or No _____

Parent/Legal Guardian Name (REQUIRED): _____

Email (REQUIRED): _____

Address (REQUIRED): _____

City (REQUIRED): _____

State: CALIFORNIA