



**For parents of children under 18 years of age**

**Form to Withdraw Authorization  
to Use Photos for Publicity Purposes**

I withdraw permission to the **Roman Catholic Corporation of the Archdiocese of Saint-Boniface** to use photos of my child (or children) for publicity purposes, such as inclusion on the website of the Archdiocese of Saint-Boniface.

Family name of the child: \_\_\_\_\_

First name: \_\_\_\_\_

Parent/guardian: \_\_\_\_\_

Signature: \_\_\_\_\_

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