



I, \_\_\_\_\_, as the Parent or Guardian, of the  
*(please print first and last name)*  
child/children named below, authorize Calvary Murrieta as agents for myself and  
the child/children listed below.

\_\_\_\_\_  
*(please print first and last name of child)*

\_\_\_\_\_  
*(please print first and last name of child)*

\_\_\_\_\_  
*(please print first and last name of child)*

\_\_\_\_\_  
*(please print first and last name of child)*

\_\_\_\_\_  
*(please print first and last name of child)*

\_\_\_\_\_  
*(please print first and last name of child)*

Media:  Yes  No Authorize any photos and/or videos taken at M.O.M.S' events to be used for promotional and/or advertising purposes on brochures, fliers, slide shows, and social media.

\_\_\_\_\_  
Parent or Guardian Signature Date