

Parental/Guardian Statement of Intent for the use of Digital Communications

CONSENT AND RELEASE FORM FOR DIGITAL COMMUNICATION INVOLVING MINORS

I am the parent or legal guardian of _____ (INSERT full name of minor).

I have been made aware of the Office of Safe Environment Digital Communication Policy for the Diocese of Green Bay regarding the use of digital communication by clergy, employees, and volunteers when communicating with an unrelated minor.

Permission for clergy, employees, and volunteers to communicate using digital communication with your minor child	
_____ Yes , I authorize...	communication with my minor child using digital communication, in accordance with the <i>Office of Safe Environment Digital Communication Policy for the Diocese of Green Bay</i> by clergy, employees, and volunteers of
_____ No , I do not authorize...	_____ (INSERT parish or school name)

If I choose to rescind my consent to the Authorization, I agree that I will inform the appropriate responsible party of the Parish and/or School in writing and that my rescission will not take effect until it is received by the Parish and/or School. I understand however that it may not be possible to recall any digital communication that has occurred prior to receipt of my written rescission.

I have read this Consent and Release form and have had the opportunity to review its terms. By signing below I acknowledge that I understand the Office of Safe Environment Digital Communication Policy and the knowledge of its significance.

Parent/Guardian Name (please print): _____

Email address: _____

Address: _____

Phone number: _____

Signature of Parent/Guardian: _____ Date: _____