	Name & City, State of Parish/Institution
PERMISSIO	ON FOR PHOTOGRAPHS/VIDEOTAPES/FILMS
I hereby auth	orize and give my consent for the taking of pictures (moving or still) of
reproduction	and further give my permission for the
-	
1.	Teaching purposes only
2.	News release
2. 3.	Publication
2.	
2. 3.	Publication

10/1/08