

Participant Contact Information

Student Name: (Please	PRINT)				
Grade: (Check one)	\Box 5 th	\Box 6 th	\Box 7 th	\square $8^{ ext{th}}$	
Name of the School/	Parish:				
School/Parish Contact N	lame:				
	Email:				
Parent's Name(s):					
Primary Email:		Pr	imary Phone#	¥	
Student's Home Addres	ss:				

Essay Criteria:

- > 400 500 word essay
- > Times New Roman (12pt. font)
- Double spaced (Standard Margins)
- ➤ Word or PDF file format

I promise not to use artificial intelligence (AI) or such programs to write my essay.

Contest Entry Requirement Checklist

- 1. Essay entry must meet the criteria listed above.
- 2. Participant Contact Information and Image Release form must be included with the essay.
- 3. Email Completed Essay and Signed Release Form to:

Lisa Oliveras at loliveras@cfocf.org

4. Essay and forms must be received via email by: 5:00pm on Thursday, April 3

The Marian Contest is administered through an Endowment Fund at The Catholic Foundation of Central Florida in conjunction with the Secretariat of Education and Secretariat of Laity, Family and Life.



Image Release Form

(Photography and Image Assignment Waiver, and Release)

I	property, activities, or events, expressly assign to The ando, and to all of their current, former, and future agents and atterest in, and to, the use of my and my child/ward's image or actographs, or audio recordings of, or made by, me and/or my event, or for any other Diocesan purpose e right to assign its rights in the Property, in whole or in part, by, the right to use and incorporate (alone or together with a publication, news release, or for any other purpose. Further
Catholic Foundation of Central Florida and the Diocese of Orlarelated entities (collectively, "the Diocese"), all rights, title and in likeness, including, but not limited to all videotape recordings, phechild/ward on Diocesan property, during a Diocesan-sponsored ev ("the Property"). The Diocese shall have, without my consent, the to any entity, parish, or school within the Diocese of Orlando. I hereby irrevocably grant the Diocese perpetually and exclusively other materials), in whole or in part, the Property, in any Diocesar I hereby authorize the reproduction, sale, lease, copyright, exhibit	ando, and to all of their current, former, and future agents and atterest in, and to, the use of my and my child/ward's image or otographs, or audio recordings of, or made by, me and/or my went, or for any other Diocesan purpose e right to assign its rights in the Property, in whole or in part, by, the right to use and incorporate (alone or together with an publication, news release, or for any other purpose. Further
other materials), in whole or in part, the Property, in any Diocesar I hereby authorize the reproduction, sale, lease, copyright, exhibit	n publication, news release, or for any other purpose. Furthe
appearance or participation in the Property. I understand and have may be used in publications, websites or other materials produced would not be identified, however, without specific written consenthe use of photographs or film taken by media that may be covering the produced in the property. I hereby waive any claims against and release the Diocese, its currents.	e been advised that photographs or videotape of participants I from time to time by the Diocese. Participants' names t. I further understand that the Diocese has no control overing the event in which my child(ren)/ward(s) participate(s).
agents, and successors and assigns from and against any and all clexpenses, liabilities, and damages whatsoever that I and/or my cheroperty or the use of the Property.	laims, demands, actions, causes of actions, suits, costs,
This release shall not obligate the Diocese to use the Property or t distribute, or exploit the Property. I acknowledge that the Diocese that my child/ward's name may be printed with photos/images in	e cannot control all photographic access to its properties, and
I represent that I am eighteen years of age or older, and that I have and Release.	e read and understand the terms of this Assignment, Waiver,
Parent's Signature	Date
Relationship to Student(s)	Parent's Contact information (REQUIRED) Phone#
Please Print Parent's Name	-
	Email:

Please Print Student's Name