



## Photo Release Form

Date: \_\_\_\_\_ Subject name: \_\_\_\_\_ *(Please Print)*

I, \_\_\_\_\_, hereby give \_\_\_\_\_, (church name) right and permission to publish photographs or videos of the above individual.

In giving my consent, I hereby release and hold harmless \_\_\_\_\_, (church name), their offices, employees/volunteers, agents and designees from any and all responsibility or liability.

I understand my photograph (in digital format) along with this release form will be maintained at \_\_\_\_\_, (church address).

I understand \_\_\_\_\_, (church name) has full authority as to which information and photos they choose to reproduce either in print, electronic documents, or on its website.

I have read this agreement and understand it.

\_\_\_\_\_  
Signature Date

Name: \_\_\_\_\_

Relationship to subject  Self,  Parent,  Legal Guardian

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Please return one signed copy to \_\_\_\_\_,  
(church name and address)