

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)