

Photo Release Form

____ I grant permission for my child’s name, voice, and photographic likeness to be used by Peace Lutheran Church, or reporters, journalists or photographers employed by the news media.

I understand that my child’s likeness may be used in publications and/or other media, whether now known or hereafter existing, controlled by Peace Lutheran Church, in perpetuity, and for other use by Peace Lutheran Church. I will make no monetary or other claim against Peace Lutheran Church for the use of the photographs/video.

____ I do not grant permission for my child’s name, voice, and photographic likeness to be used by Peace Lutheran Church, or reporters, journalists or photographers employed by the news media.

Child(ren)’s Name(s): (Please Print Each Name Clearly)

Parent’s/Legal Guardian’s Printed Name

Parent’s/Legal Guardian’s Signature Date

Please return completed form to the Education mailbox located in the Narthex