

Authorization and Release for Photos, Audio/Video Recording Cardboard City - November 12-13, 2021

Name	
Child's Name (s):	
Address:	
Phone:	Email:
Church (hereafter Lake (images) of participant the Cardboartd City ev	cksonville (hereafter Family Promise) and Lakewood United Methodist ewood UMC) routinely take photographs or make audio or video recordings ts in Family Promise and Lakewood UMC events and activities including rent. There are times when Family Promise and/or Lakewood UMC would in reports, presentations, and/or publicity/promotion for the organizations.
Please complete or	nly ONE of the options below:
Jacksonville and Lakevand audio/video record consideration. I agree the existing or created in the by signing this release likeness appears, and the this authorization in whose used for news or purpose be used for profit by the same and the same authorization in whose same authorization in the same authorization in whose same authorizat	, individually, and if applicable, in my or legal guardian of the above child, hereby GRANT Family Promise of wood United Methodist Church, the right to make edit, use, or display photos dings (images) of my child and/or me without compensation or any other that the images may be used in any form of written or electronic media now he future, including standard print, websites, CD or DVD. I understand that I waive the right to inspect or approve any finished product in which my that this release will remain in effect indefinitely, unless I otherwise revoke riting. I understand that the images will be externally released but will only ablicity purposes to benefit Family Promise and Lakewood UMC and will be yany individual or entity. I further understand that my/my child's images y name without further consent.
I,permission to use my/r	, DO NOT grant Family Promise my child's images for any news or publicity purpose.
Signature of Participan	at or Parent/Guardian:
Date:	
Drint Name:	