



## FIRST UNITED METHODIST CHURCH

*Connecting to Christ – Growing in Community – Serving the World*

### PHOTO RELEASE FORM

I, \_\_\_\_\_, (please print parent/guardian's name) whose child/ren,

Name of 1<sup>st</sup> child: \_\_\_\_\_ Grade \_\_\_\_\_

Name of 2<sup>nd</sup> child: \_\_\_\_\_ Grade \_\_\_\_\_

Name of 3<sup>rd</sup> child: \_\_\_\_\_ Grade \_\_\_\_\_

will be participating in the children's or youth ministry activities of First United Methodist Church, hereby give permission for images of my child captured through video, photo and digital camera during class time & special activities, to be used solely for purposes of promotional material and publications and always without using names, and I waive any right of compensation or ownership thereto.

\_\_\_\_\_ I give permission

\_\_\_\_\_ I DO NOT give permission

\_\_\_\_\_ / \_\_\_\_ / \_\_\_\_

Parent/Guardian's Signature

Date

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