Photo Release Form

Kansas Avenue SDA Church – 4491 Kansas Avenue, Riverside, CA 92507

951-682-9810

Permission to Use Photograph

Subject: Vacation Bible School – Scuba
Location: Kansas Avenue SDA Church

I grant to Kansas Avenue Children’s Ministry, its representatives, and employees the right to take photographs of me (my child/children, grandchild/children, niece, nephew) in connection with the above-identified subject.

I authorize Kansas Avenue Children’s Ministry, its assigns, and transferees to copyright, use, and publish this document in print and/or electronically.

I agree that Kansas Avenue Children’s Ministry may use photographs of me (my child/children, grandchild/children, niece, nephew) with or without my name for any lawful purpose, including, for example, publicity, illustration, advertising, and Web content.

If you have any questions about this, please call the church office at 951-682-9810.

I have read and understand the above:

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature, parent, or guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (if under age 18)