

Willowdale Baptist Church MINOR (CHILD) PHOTO RELEASE FORM

I,	, the parent or legal guardian of	
	_ [Child] grant Willowdale Bap	otist Church my
permission to use the photographs	taken in any Summer VBS rela	ated events for any
legal use, including but not limited to: publicity, copyright purposes, illustration,		
advertising, and web content.		
Furthermore, I understand that no royalty, fee or other compensation shall become		
payable to me by reason of such use.		
Parent/Guardian's Signature:		
Parent/Guardian's Name:		
Child's Name:		
Child's Name:		_
Phone Number		