



Standard Photo Release Form

I hereby authorize True Life Christian Church to publish photographs taken of me and/or the undersigned minor children, and our names, for use in True Life Christian Church's printed publications, website, and social media sites. I release True Life Christian Church from any expectation of confidentiality for the undersigned minor children and myself and attest that I am the parent or legal guardian of the children listed below; and that I have the authority to authorize True Life Christian Church to use their photographs and names. I acknowledge that since participation in True Life Christian Church's website and social media confers no rights of ownership whatsoever. I release True Life Christian Church, its contractors and its employees from liability for any claims by me or any third party in connection with my participation or the participation of the undersigned minor children.

Print name of Parent or Legal Guardian: _____

Signature: _____ Date: _____

Street Address: _____

City, State, Zip: _____

Names and Ages of Minor Children:

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____