

Sample Media Release Form

Opt In: For children under age 18, please complete the section below.

I, _____, Parent/Guardian of (you may list multiple names)

Grant permission for [CHURCH NAME] to take photos/video of my child(ren) during church events and to use these images in church publications, website and social media. I understand that photos and videos will NEVER be accompanied by captions or tags that include names or any other identifying information.

Signature: _____ Printed name: _____

Date: _____

Opt Out: We respect the fact that you may wish to NOT have photos or video of yourself, or your children under age 18, used for church purposes. If this is the case, please complete this Media Opt Out section below.

I do not wish my photograph, or those which include members of my family who are listed below, to be used by [CHURCH NAME] for church purposes, including but not limited to: still photography, video, electronic and print publications and websites.

Please list all household members included in this opt out:

Signature: _____ Printed name: _____

Date: _____