Photo Release Form

I hereby grant all rights to United Methodist Church (“Church”) to use my photograph and/or other reproduction of me or my physical likeness for United Methodist publication purposes, whether electronic, print, video, digital or electronic publishing via the Internet. I further agree that any uses described may be made without additional consideration or compensation.

I understand that the Church may use my name or other identifying information in descriptive text or credits. I acknowledge Church’s right to crop or treat my photograph(s) at its discretion. I also acknowledge that Church may choose not to use my photo at this time, but may do so at its own discretion at a later date. I waive any right that I may have to inspect or approve the copy and/or finished product or products that may be used. I understand that in signing this release, I agree to all these terms and that I cannot participate without this release.

Name: Age: Date:

For anyone under 18 years of age: I certify that I am a custodial parent and have the aforementioned rights to assign.

Signature of Parent or Guardian: Date:

Address:

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