## PHOTO RELEASE FORM OF A MINOR

Ι,	hereby grant and a	authorize on behalf of the following minor	(s)
Minor Name	Minor Age	Minor Date of Birth	
1.	1.	1.	
2.	2.	2.	
3.	3.	3.	
4.	4.	4.	
5.	5.	5.	
make use of any and all materials including, but ne letters, annual reports, pro	pictures or video taken of me ot limited to, newsletters, flyer	te, edit, alter, copy, exhibit, publish, distriction to be used in and/or for any lawful pross, posters, brochures, advertisements, furnalists, websites, social networking sites any other consideration.	motional ndraising
This authorization extends	s to all languages, media, form	ats and markets now known or later disco	overed.
	ontinue indefinitely, unless I oth norization in writing upon reach	nerwise revoke this authorization in writin ning majority age.	g, or the
	r the minor(s) may have to ins including written or electronic	pect or approve any finished product in v	which the
	ing compensated. I waive any	s use of his/her likeness or has otherwise right to royalties or other compensation a	
I understand and agree t not be returned.	hat these materials shall beco	me the property of Faith Lutheran Churc	h and will
which I, my heirs, represe		ch from all liability, petitions, and causes tors, or any other persons may make whit estate(s).	
	ne above authorization, release	contract for the minor(s) in this regard, and agreement, prior to its execution, a	
This release shall be bin and assigns.	ding upon the minor(s) and r	ne, and our respective heirs, legal repre	esentatives,
Printed Name:			
Relationship to Minor(s):			
Signature:		Date:	