

## Adult/Parental Release Form for Media Recording At Tweeners' Events

I, the undersigned, do hereby consent and agree that Lake Washington United Methodist Church, its employees, or agents have the right to take photographs, of me or my children exclusively for the purpose of ministry within or promotion of or within the Lake Washington United Methodist Church, and to use these in:

\_\_\_\_\_ Church Publications (names always withheld)

\_\_\_\_\_ Church Website (names always withheld)

\_\_\_\_\_ LWUMC Facebook Page (names always withheld)

**My name or my children's name(s) and identity will not be revealed.** I understand that there will be no financial or other remuneration for recording me, either for initial or subsequent transmission or playback.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement. I further represent that I am legally authorized to grant or withhold consent for the minor children listed below.

This agreement is good until I rescind it.

\_\_\_\_\_ I deny permission to use my image or my children's image at all.

\_\_\_\_\_ I grant permission to use my image or my children's image as checked off and initialed above.

Name (print) \_\_\_\_\_

Children's names: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_