Media Release Form

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

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

_____

_____

_____

Grant permission for Trinity Lutheran Church to take photos/videos of my child(ren) during church events and to use these images in church publications, websites, 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/videos of yourself, or your children under the age of 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 Trinity Lutheran Church for church purposes, including but not limited to: still photography, video, electronic and print publications, websites, and social media.

Please list all household members included in this opt out:

_____

_____

_____

Signature: _____ Printed Name:

_____

Date: _____