

STANDARD PHOTO RELEASE FORM FOR MINOR CHILDREN

I hereby authorize Faith Community Fellowship to publish the photographs the undersigned minor children, and their names, for use in Faith Community Fellowship's printed publications and website. (i.e. FCF Newsletter, FCF Facebook page and FCF Website)

I release Faith Community Fellowship from any expectation of confidentiality for the undersigned minor children and myself and attest that I am the parent or legal guardian of the children listed below and that I have the authority to authorize Faith Community Fellowship to use their photographs and names.

I acknowledge that since participation in publications and websites produced by Faith Community Fellowship is voluntary, neither the minor children nor I will receive financial compensation.

I further agree that participation in any publication and website produced by Faith Community Fellowship confers no rights of ownership whatsoever. I release Faith Community Fellowship, its employees and volunteers from liability for any claims by me or any third party in connection with the participation of the undersigned minor children.

PLEASE LIST ALL MINOR CHILDREN BELOW: Name /Age Printed Name of Parent/Guardian Signature of Parent/Guardian

Date