## Photographic Image Release Form for Richmond United Methodist Church

I hereby give permission to Richmond United Methodist Church to use my name and/or photographic likeness in all forms of print and digital media for advertising, outreach, archives, and any other lawful purposes.

Printed Name:	
Signature:	
Date:	
Printed Name:	······································
Signature:	
Date:	
Guardian Consent for individuals under the age of	18:
I am the parent/legal guardian of the following chil approve of its terms in their behalf.	dren, and have read this release and
I recognize that in public advertising and outreach, with their photographs.	names of minors will not be included
Printed Name of Child:	
Guardian Signature:	Date: