



FLAT CREEK

BAPTIST CHURCH

PHOTO RELEASE 2019

Please complete ONE of the below:

I, _____ (parent/guardian),
GIVE Flat Creek Baptist Church permission to photograph and/or videotape my child for use in promotional materials and other publicity efforts. I understand that the photographs may be used in publications, print ads, and/or electronic media. I release Flat Creek Baptist Church from liability in connection with any such use. I understand that my child's name and/or address will not be published in any form.

I, _____ (parent/guardian),
DO NOT GIVE Flat Creek Baptist Church Music Ministry permission to photograph or videotape my child.

Student's Name: _____

Parent/Guardian Signature: _____

Date: _____