



MEDIA RELEASE FORM

This form is for _____ (print name clearly) who is

- Under 18 years of age or not capable of providing consent
- 18 years of age or older

I hereby grant Temple Lutheran Church of Havertown, PA permission to use my likeness in photographs, video recordings or digital photos in all its publications, including website entries and posted on the church's social media, without payment or any other consideration. I recognize that my name may be associated with my likeness. I understand and agree that these materials will become the property of the organization and will not be returned. I hereby irrevocably authorize the organization to edit, alter, copy, exhibit, publish or distribute these photos for purposes of publicizing the organization's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of a photo of me. I hereby hold harmless and release and forever discharge the organization from all claims, demands and causes of action that I, my heirs, representatives, executors, administrators, or any other individuals acting on my behalf or on behalf of my estate have or may have by reason of this authorization. TLC agrees to abide by the Electronic and Social Media section of the Child and Youth Safety Policy. TLC recognizes the delicate balance between desire for full participation by child and personal privacy and will endeavor to work with parents and children on achieving this balance.

If person named above is 18 years of age or older

I have read this release before signing, and I understand the contents, meaning and impact of this release.

(Signature)

(Date)

If person named above is under 18 years of age or not capable of providing consent

I have read this release before signing, and I understand the contents, meaning and impact of this release.

I hereby certify that I am the parent or guardian of _____ named above, and do hereby give my consent without reservation to the foregoing release on behalf of this person.

(Parent/guardian's signature)

(Date)

(Parent/guardian's printed name)