



Community of Christ

Photo Release

In consideration of the right to participate in church activities, by my signature below I hereby give consent to and authorize the taking of photographs or videotapes in which I may appear.

I hereby waive all rights of privacy in and to any said pictures, videotapes or web page.

Name (printed) _____

Signature _____
or signature of Parent/Guardian if person is under the age of 18

Date: _____