

## **Photo Release Form**

Auburn United Methodist Church  
207 South Auburn Road  
Auburn, MI 48611

Permission to Use Photograph

Event: **All church events and activities.**

I grant to Auburn United Methodist Church, the right to take photographs of me and my family in connection with the above-identified event. I authorize Auburn United Methodist Church, its assigns and transferees to copyright, use and publish the same in print and/or electronically.

I agree that Auburn United Methodist Church may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I agree that once I have signed the release it will remain on file in the office of Auburn United Methodist Church for future use until I should decide to revoke this agreement at which time I will contact the office to have it removed.

I have read and understand the above:

Signature \_\_\_\_\_

Printed name \_\_\_\_\_

Address \_\_\_\_\_

Date \_\_\_\_\_

Signature, parent or guardian \_\_\_\_\_  
(if under age 18)

List of family members this release covers:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**CHECK HERE IF YOU DO NOT GRANT A PHOTO RELEASE.**