



### **Photography/Videography Release**

As a parent or guardian of \_\_\_\_\_, I hereby consent to the use of photographs/videos taken during the church activities for the Alive Fellowship Church website, social media, crafts, livestream, and church presentations for as long as we attend Alive Fellowship Church and their ministries. I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

Yes, I give consent for Alive Fellowship Church to photograph/video my child for church purposes and/or at church events.

No, I do not authorize Alive Fellowship Church to photograph/video my child for church purposes and/or at church events.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_