

Additional Information: Please list any current health problems; directives for medical and/or emergency care, etc. Please also list any **general allergies**, any **allergies to medication** and/or pre-existing conditions.

PEACE LUTHERAN CHURCH MONROE - PHOTO RELEASE FORM

Permission to use Photograph(s)

Event: Kids Bible Day Camp

I grant to Peace Lutheran Church, Monroe, WA, the right to take photographs of me and my family in connection with the above-identified event. I authorize Peace Lutheran Church to use and publish the same in print and/or electronically. I agree that Peace Lutheran Church may use such photographs for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

I have read and understand the above:

Printed name (parent)

Signature (parent)

Printed name (children)

Date

Please return completed form to peacechurchmonroe@gmail.com or the church office.

