## **Photograph Release Form**

Dear Parent,	
At Our Savior's Lutheran Church, we often have the opport and young adults engaged in our activities. We would like to such photos of your child in our publications, on our web s vehicles that promote our congregation. Many times name are, only first names will be published.	o request your permission to use ite, and in other communication
Please fill out this form to give your consent. Thank you ve	ery much.
Child's Name:	
Parent's Name:	Phone:
Permission is granted for Our Savior's Lutheran Church to use photographs of my child to illustrate the activities of our institution in communications such as, but not limited to: website, print advertising, media relations, and other publications.	
Signature	 Date