

# Pines Presbyterian Church

## Children & Youth Ministry Media Consent and Release Form

**Instructions:** You may type your information directly into the form blanks provided (download first).

Make sure to save (when completed) so that all typed information stays in the blanks.

The form can be emailed to [Kristen@PinesPC.org](mailto:Kristen@PinesPC.org) or returned at church in person or by mail:

Pines Presbyterian Church - Attn: Kristen Beall - 12751 Kimberley Lane, Houston, Texas 77024

Minor's Name (FIRST & LAST): \_\_\_\_\_ Date: \_\_\_\_\_

I am the Parent/ Guardian of the above-named minor who is under eighteen years of age and am fully competent to sign this release. This release allows Pines Presbyterian Church to print, photograph, and/or record my child/youth at church events for inclusion in Pines Presbyterian publications including publication on the Pines Presbyterian Church's website. This release includes the use of my children/youth's work, name, image, and/or voice.

\_\_\_\_\_ I hereby GRANT permission to Pines Presbyterian Church and its employees and representatives to print, photograph, and record my child for use in audio, video, film or any other electronic, digital, or printed media.

\_\_\_\_\_ I hereby REVOKE Pines Presbyterian Church and its employees and representatives permission to print, photograph, and record my child/ youth for use in audio, video, film or any other electronic, digital, or printed media.

I agree to release Pines Presbyterian Church, its past, present and future elders, clergy, employees, agents, and representatives from any and all liability, claims, demands, and causes of action arising out of the use of this material. I certify that I have read this document and fully understand its terms and conditions. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use. Further, I understand this document stays in effect until the minor turns eighteen years of age or I withdraw consent in writing. Consent may be withdrawn at any time by sending a written request to the Office Manager at Pines Presbyterian Church. This permission will be kept on file until revoked in writing.

About the Child/ Youth (Minor) - Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Parent/Guardian's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Parent/Guardian's Name(s): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: (Cell) \_\_\_\_\_ (Home) \_\_\_\_\_

