



*Family of God
Lutheran School
Photo Release Form*



Please review this parental consent form that requests permission for your child's photo/image to be published. If you wish to rescind this agreement, you may do so at any time in writing to the school and such rescission will take effect upon receipt by the school. If granted permission your child's name will not be used.

Initial all applicable choices:

- () I grant permission for my child's photo to be included on the Family of God's website located at www.citlink.net/~familyofgod.
- () I grant permission for my child's photo to be included in the School literature (newlsetter, brochure, classroom walls)
- () I grant permission for my child's photo to be included in the news articles such as: Mohave Valley Daily News, Lutheran Sentinel, Family of God Newsletter.

By initialing above and signing below, I acknowledge my understanding of this form and grant my permission for use of the photograph's as indicated.

Special instructions: _____

Print Child's Name

Print Your Name

Signature

Date