Celebration Children's Ministry

Photo Release Form

I, the undersigned, hereby grant permission to and authorize the use and reproduction by Celebration Church, or anyone authorized by Celebration Church, of any and all photographs, the negatives and positives, and video and audio recordings, which Celebration Church will take of my minor children for which I am the parent or legal guardian indicated below, for the Angel Baby Presentation during the Christmas Program on December 21, 2025. I understand that I am granting royalty free permissions to Celebration Church for both myself and any minor children. All negatives and positives, together with the prints and other reproductions, and other video and audio recordings shall constitute Celebration Church's property, solely and completely. I understand that I can request copies of the pictures or recordings by contacting Celebration Church.

_____ _____

Parent or Legal Guardian Printed Name Date

_____

Parent or Legal Guardian Signature

I **DO NOT** give my permission _____

Parent or Legal Guardian Signature

I give my permission for:

_____

Minor Child's Printed Name

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Minor Child's Printed Name

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Minor Child's Printed Name

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Minor Child's Printed Name