



# Child/Youth Photo Permission Form FCC Albany

Child's Name \_\_\_\_\_ Date \_\_\_\_\_

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

Please respond with yes or no:

\_\_\_\_\_ I give permission for FCC Albany to use my child's image, **with name**, to be use for worship slides, newsletters, website, or social networks associated with FCC Albany.

\_\_\_\_\_ I give permission for FCC Albany to use my child's image, **without name**, to be use for worship slides, newsletters, website, or social networks associated with FCC Albany.

\_\_\_\_\_ I **do not** give permission for FCC Albany to use my child's image on any printed or online materials.

Parent/Guardian's Signature \_\_\_\_\_

Date \_\_\_\_\_