



# Social Media Photo Waiver

I, \_\_\_\_\_, give permission for Awana Clubs at New Hope Baptist Church  
(Parent or Guardian name)

To photograph and video my child, \_\_\_\_\_, for the following purposes:  
(Child's name)

Type of Use:	(Please check one)	
	Grant Permission	Decline Permission
<b>Photographs and video:</b>		
Display in a printed materials, shown to current and prospective Awana Clubbers.	<input type="checkbox"/>	<input type="checkbox"/>
Post photos on Awana's Facebook, Instagram, or other social Media.	<input type="checkbox"/>	<input type="checkbox"/>

I understand that it is my responsibility to update this form in the event that I no longer wish to authorize one or more of the above uses. I agree that this form will remain in effect during the term of my child's enrollment.

Signed:

\_\_\_\_\_  
(Parent or Guardian signature)

\_\_\_\_\_  
(Date)

This Release authorization ends August 31<sup>st</sup>, 2018