



**Saint Peter's Church, Lewes**

**Photo Release Form for Children and Youth**

**Raise a Child OF Faith**

I agree that St. Peter's Episcopal Church may photograph and record my child/dependent's likeness and activities during church related activities. I grant the following rights to St. Peter's Episcopal Church: permission to use and re-use, publish and re-publish, and modify and alter the image(s) taken during the shoot. Use of the images for editorial, commercial, trade, advertising, and any other purpose may be done in any medium now existing or subsequently developed, on the church website and on the internet, and worldwide in perpetuity for the purposes stated above.

I waive my right to inspect or approve any editorial text or copy that is used in connection with the images and release and discharge St. Peters Episcopal Church from any and all claims arising out of use of the images for the purposes described above, including any claims for libel, invasion of privacy, or other tortuous act.

**Youth's Name** \_\_\_\_\_

**Parent/Guardians Name**\_\_\_\_\_

**Parent/Guardian Signature**\_\_\_\_\_

**DATE:** \_\_\_\_/ \_\_\_\_/ \_\_\_\_