

Opt-Out Form

I do **not** authorize LifeWay Church to use photographs or video recordings of myself (and/or my children if so indicated in this form) in whole or in part for advertising, media, video, or any other promotional purpose. I hereby confirm that I am of legal age (over 18) and have every right to contract in my own name. **I have provided a picture of myself (and/or my children) to be used as reference** to assure my (and/or their) dis-inclusion in any images used by LifeWay Church. I will notify photographers at my vicinity during any LifeWay event that I do not wish to be photographed or video taped. In signing this form, I understand that LifeWay Church will make reasonable efforts to avoid access to or remove my images (and/or that of my children) for all purposes identified herein.

PERSONAL INFORMATION

Date: _____

Name: _____ e-mail: _____

Address: _____ City: _____

State: _____ Zip: _____ Phone: _____

Child's Name(s): _____

I hereby confirm that I have read this Opt-Out Form and am familiar with its contents. I further affirm that I am the Parent/Legal Guardian of the minors mentioned in this form.

Adult Name: _____ Signature: _____

*Please return this form with all reference photos to our **Church Office** or mail it to LifeWay Church at PO Box 233 East Derry, NH 03041.*



:: Church Office Use Only ::

Photo(s) received by:
