

Junior Bible Quiz Release Form

Directions: Church Coordinator: Please **print** the Quizzers name and the division they will be quizzing in. Have each parent sign next to their quizzers name. **If they do not sign, please have them complete and sign the non-consent/non-release.** Please make sure the quizzers names are spelled correctly.

I consent to the use of videotape, photographs, audiotapes, or any other visual or audio reproduction in which my child may appear to the Arkansas District Council of the Assemblies of God. I release the Arkansas District Council of the Assemblies of God from any liability connected with the use of picture or voice recording as part of any promotion, recruitment, or fundraising program.

Church Name	City	
Quizzer Name	Division	Parents Signature
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Quizzers Name	Division	Parents Signature
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Non-Consent and Release:

Directions: Please print clearly and sign /date where indicated.

Church Name: _____

I _____, **do not** consent to the use of videotapes, photographs, audiotapes, or any other visual or audio reproduction of my child, _____.

Signature: _____

Date: _____