



MINOR PHOTO RELEASE FORM

I, (print name) _____, parent/legal guardian of

(child's name) _____, hereby grant permission to the Church of The Harvest, Inc. (hereafter Ministry) representatives, to take and use: photographs, media footage and/or digital images of my child for use in news releases and/or materials as follows: printed publications or materials, marketing materials, electronic publications, media footage or web sites. I acknowledge the Ministry's right to crop or treat the photograph(s) and/or media footage at its discretion. I also acknowledge that the Ministries may choose not to use my child's photograph(s) or media footage at this time but may do so at its own discretion at a later date.

I agree that my child's name and identity will not be revealed in descriptive text or commentary in connection with the image(s). I authorize the use of these images without compensation to me. All negatives, prints and digital reproductions shall be the property of Ministry.

I also understand that once my child's image is posted on the Ministry's website, the image can be downloaded by any computer user. Therefore, I agree to indemnify and hold harmless the Ministry, the church, its trustees, pastor, associate pastors, employees, deacons, its members and designees from any claims arising out of the use of my child's photograph(s) or media footage. The Ministry reserves the right to discontinue use of any photograph(s) or media footage without notice.

Signature of Parent/Legal Guardian

Date