

# New Hope Community Church

229375 County Road J • Wausau, WI 54403

## ***Parental/Guardian Photo Image Consent Form***

### **September 1<sup>st</sup>, 2024 – September 30<sup>th</sup>, 2025**

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Children's Names:

_____	_____
_____	_____
_____	_____

***Please indicate and sign/date below:***

\_\_\_\_\_ I hereby ***grant*** permission for photos, videos or audio recordings taken of my child (ren), while in church activities for/at New Hope Community Church, to be used in the following (check all that apply):

\_\_\_\_\_ Any printed publication created by or for the church

\_\_\_\_\_ Any electronic publication created by or for the church

\_\_\_\_\_ Any website created by or for the church

\_\_\_\_\_ Any social media page created by or for the church

\_\_\_\_\_ I request that you **do not use** my child(ren)'s photos, videos, or audio recordings, in any of the above listed ways for/at New Hope Community Church.

\_\_\_\_\_  
(parent/guardian signature)

\_\_\_\_\_  
(date)