



**Parent Authorization for Participation & Children's Ministry Photo | Video Release Form**

Child's Name: \_\_\_\_\_ Date \_\_\_\_\_

Event: \_\_\_\_\_

Or this form is valid for all events my child participates in at CCPC. If so sign below:

Signature \_\_\_\_\_

**Parent Authorization for Participation:**

In consideration of my child's participation in the activities of CCPC Children's Ministry, I do hereby declare myself and/or my child to be medically able to participate in the activities offered at the listed event(s). I understand that there are risks which may include disabling injury and or death in all physical activities undertaken. I agree to hold free from any liability CCPC Children's Ministry and CCPC for myself and/or child connected in participating in church ministry events. I understand that all Children's Ministry activities and events are supervised.

In registering my child for a Children's Ministry event at Central College Presbyterian Church, I hereby authorize its representatives and employees the right to use, reproduce and/or publish photographs and/or video that pertain to my child in connection to the event he/she is participating in without compensation. I understand that this material may be used in various publications, recruitment materials, broadcast public service advertising (PSAs) or for other related endeavors. This material may also appear on Central College Presbyterian Church's Internet web page or on the CCPC-VBS private FaceBook page which is by invitation only.

**I have read and understand the above:**

Parent Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Phone #: \_\_\_\_\_