

Photograph and Publicity Release Form

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I have read and understood this consent and release. I understand that I have the right to revoke this consent at any time, provided my revocation is in writing.

I give my consent to Soapstone UMC to use my name and likeness to promote the church, its ministries, and/or programs and activities.

Signature _____ Date _____

Printed Name _____

Organization Name (if applicable) _____

I do not give my consent to Soapstone UMC to use my name and likeness to promote the church, its ministries, and/or programs and activities.

Signature _____ Date _____

Printed Name _____

Organization Name (if applicable) _____

For Church Pictorial Directory – Please print clearly.

Name(s) of those in photo _____

Address/City/State/Zip _____

Contact Phone/Email _____