



Leader Clubber Media Release Consent Form



Please ensure one box is checked for Part 1 and one box is checked for Part 2 of this form.

Part 1 – Events

I, _____, hereby agree and give my permission for Vintage
(Name of parent/guardian if student is a minor, under the age of 18.
Name of student if an adult, 18 years of age or older.)

Park Community Church Awana to record, film, photograph, audiotape or videotape my/my child’s name, image, student work, and performance (hereinafter collectively referred to as “Works”) and to display, publish or distribute these Works for the purpose of publishing, posting on the VPCC Awana website, posting on social media sites and/or for broadcasting on television or radio as determined by VPCC Awana..

I hereby waive any right to approve the use of these Works now or in the future, whether the use is known to me or unknown, and I waive any right to any royalties related to the use of these Works. I understand that the Works may appear in electronic form on the internet or in other publications outside of VPCC Awana’s control. I agree that I will not hold VPCC Awana responsible for any harm that may arise from such unauthorized reproduction.

Please mark this box if you **AGREE** that your child may participate in recorded VPCC Awana events and VPCC Awana hosted events as described above. (See Part 2 below)

Please mark this box if you **DO NOT WISH** your child to participate in recorded VPCC Awana events and VPCC Awana hosted events as described above

Part 2 – Media Specific

I also understand that external media organizations may attend Club events. I give permission for my/my child’s name, image, student work, and performance to be photographed, filmed, audio-taped or videotaped for the purpose of being published and/or broadcast on-line, on television or radio.

Please mark this box if you **AGREE** that your child may participate in media events that may be published or broadcast by organizations external to VPCC Awana.

Please mark this box if you **DO NOT WISH** your child to be photographed, filmed, audio-taped or videotaped at media events.

I have read this Student Media Release Consent Form and I fully understand the contents and meaning of this release. I understand that I am free to contact the Commander with any questions regarding this release.

LIT/Clubber’s Name: _____

LIT/Clubber’s Signature _____
(If 18 years of age or older)

Club: _____

Parent’s/Guardian’s Name: _____

Parent’s/Guardian’s Signature: _____
(If LIT/student is a minor – under the age of 18)

Date: _____