Susquehanna Annual Conference The United Methodist Church

General Media Release Form

I, the undersigned, hereby authorize any employee, agent or representative of the Susquehanna Annual Conference of the United Methodist Church to photograph me, take motion pictures of me, take video footage of me, and/or make electronic sound recordings of me (herein referred to as photographic or electronic reproductions).

I authorize the use of any such photographic or electronic reproductions of me for any lawful purpose, including but not limited to educational and other public media as may be deemed appropriate by the Susquehanna Annual Conference of the United Methodist Church (I understand that I may be identifiable from such photographic or electronic reproductions).

| Agreed and accepted by: | |
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| Print Name | |
| Title | |
| Address | |
| City State, Zip | |
| PhoneEmail_ | |
| Signature | |
| Date | |
| PARENTAL CONSENT I certify that I am the parent or guardian of the individual above, a minor under the age of nineteen years. I hereby agree to assume legal responsibility for his/her authorizations referred to | |
| in this General Media Release. | • |
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| | |
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| | Date |
| | Phone Number (if different) |
| | Email |