**Release Form for Media Recording & Photos**

I, the undersigned, do hereby consent and agree that **Oasis Community Church**, its members, or agents have the right to take photographs, videotape, or digital recordings of my minor child, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ beginning on **\_June 26, 2023**\_and ending on **\_June 26, 2024\_** and to use these in any and all media, now or hereafter known, and exclusively for the purpose of posting them to the church website/Face book account and/or other computer media sources. I further consent that my minor child’s name and identity may be revealed therein or by descriptive text or commentary.

I do hereby release to **Oasis Community Church**, its members and agents all rights to exhibit this work in print and electronic form publicly, to market and post on the internet. I waive any rights, claims, or interest I may have to control the use of my minor child’s identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for recording of my minor child, either for initial or subsequent transmission or playback.

I also understand that **Oasis Community Church** is not responsible for any expense or liability incurred as a result of my child’s participation in this recording, including medical expenses due to any sickness or injury incurred as a result.

I represent that I am at least 18 years of age, have read and understand the foregoing statement, and am competent to execute this agreement on behalf on my minor child.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:

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

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone:

Witness for the undersigned:

Signature:

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

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Home Phone:

Witness for the undersigned:

Signature: