



## GRACE LUTHERAN CHURCH

521 Providence Road  
Chesapeake, VA 23325  
(757) 420-4704

[www.gracelutheranchesapeake.org](http://www.gracelutheranchesapeake.org)

# 2016-17 Sunday School Registration

	Child's Name	Birthday	Grade	Allergies/ Medications	What else should your child's teacher know about them?
1					
2					
3					
4					
5					

Parent/Guardian Name(s): \_\_\_\_\_

\_\_\_\_\_  GLC Member(s)  Non-member(s)

Home Phone: \_\_\_\_\_ Cell Phone(s): \_\_\_\_\_

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

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

Emergency Contact: \_\_\_\_\_

~ PLEASE COMPLETE PHOTO RELEASE ON BACK! ~

**Please return completed form to the GLC office the first day of Sunday School.**

Grace Lutheran Church is a community of believers in Christ called to be servants to all people.

# Image release form

GLC's promise to you:

- We try not to post anything that would be embarrassing, objectionable or hurtful to anyone in the photo. If we know someone is shy about such things, we ask them before posting the photo.
  - We don't put names as captions with photos (except for pastors/staff or other adult members who have given expressed written consent)
  - We will gladly provide credit for who took a particular photo if desired by the photographer, and we would certainly honor any copyright wishes or restrictions.
  - We will gladly remove any photo immediately upon request.
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I hereby grant Grace Lutheran Church (the organization) permission to use the likeness of my child/children in photographs, video recordings or electronic images in any and all of its publications, including website entries and social media, without payment or any other consideration. I understand and agree that these materials will become the property of the organization and will not be returned. I hereby irrevocably authorize the organization to edit, alter, copy, exhibit, publish or distribute these images for purposes of publicizing the organization's programs or for any other lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the image of my child/children. I hereby hold harmless and release and forever discharge the organization from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

I hereby certify that I am the parent or guardian of \_\_\_\_\_, named on the reverse, and do hereby give my consent without reservation to the foregoing release on behalf of this/these minors.

\_\_\_\_\_  
*Parent/Guardian Printed Name    Parent/Guardian Signature    Date*