

**Please print name**

**Last name:** \_\_\_\_\_, **First Name:** \_\_\_\_\_

**Photo Policy and Consent**

**(ADULT)**

First Presbyterian Church of Arlington Heights (FPCA) will be able to use the name, photograph, videotape, or interview of a member or church participant in church publications and productions, including publications distributed separately from FPCA, such as newspaper, local media, and other organizations, unless the member or church participant denies consent by indicating so on the consent form (see below). If consent has been granted, a member or church participant may submit a written request to the Church Business Administrator at any time to reverse the decision and prohibit the use of the member or church participant's name, photograph, videotaped image, or interview in FPCA publications and productions, including, but not limited to, the church's website, monthly Chimes newsletter, and webcasting programs, and publications distributed separately from FPCA, such as newspaper, local media, and other organizations. FPCA may include both first and last names in articles with identifying photographs published on the FPCA website.

Under appropriate circumstances, FPCA may allow outside reporters and/or photographers to attend church programs or events. During such instances, media representatives may interview, photograph, and/or videotape members or church participants of FPCA. In order for FPCA to grant permission to outside entities to photograph, videotape, or interview a student, the member or church participant must have signed the general consent form.

If a member or church participant elects to prohibit use of his/her name, photograph, videotaped image, and/or interview, FPCA will not use the name, photograph, or videotaped image in any church publication or production, including publications distributed separately from FPCA, such as newspaper, local media, and other organizations.

**CONSENT FORM**

I have read and understand the responsibilities outlined in the preceding sections. I have the right to revise this consent at any time by providing a written request to FPCA.

\_\_\_\_\_ I have read and understand that by signing this consent form I acknowledge that my name, photograph, videotape, and/or interview may be used in church publications or in publications distributed separately from FPCA, such as newspaper, local media, and other organizations. I understand I have the right to revoke this consent at any time by providing a written request to FPCA.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_ I DO NOT CONSENT

Signature: \_\_\_\_\_

Date: \_\_\_\_\_