



Participant Release Form

I hereby authorize the **North Carolina Synod of the Evangelical Lutheran Church in America (NC Synod)** to record on film, CD, DVD, video or audio tape, photograph or otherwise use my name, likeness, image, voice, interview and/or performance on an unlimited basis in all markets or media now known or hereafter devised for NO CHARGE or compensation. I also agree that the NC Synod may also authorize others to use this recording, video/audio, film or photograph or any part thereof.

I release all claims for copyright, ownership or compensation. I additionally authorize the NC Synod to use my name, likeness, voice, performance and biography for publicity or promotion without any compensation or payment being made for any such use or further use thereof on an unlimited basis in all markets and media now known or hereafter devised throughout the world.

I understand that my participation is strictly voluntary and I will not be compensated. I further understand that I am not required to give this permission.

Signature: _____ Date: _____

PLEASE PRINT

Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

IF THE PARTICIPANT IS A MINOR (under 18 years of age), A PARENT OR GUARDIAN MUST EXECUTE THIS RELEASE.

I agree on behalf of my child, _____

Signature of Parent or Guardian	Date	Relationship to child
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Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____