



**Algona First United Methodist Church  
Media Release Parental Consent Form**

Dear Parent/Guardian:

Please be advised that during the year your child may be photographed, videotaped or interviewed at various church activities. With your consent that information may be shared via social media platforms, the internet, newspapers, television, the church website etc., please sign and date below and return to the church.

**Childs name:** \_\_\_\_\_

**Parents/Guardians  
signature:** \_\_\_\_\_

**Parents/Guardians printed  
name:** \_\_\_\_\_

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