

# Southeast Baptist Church, Greensboro, NC

## PHOTOGRAPHY/FILMOGRAPHY POLICY

Participation in Southeast Baptist Church (SEBC) activities implies permission for publication of any media recorded, EXCEPT as it pertains to children. Any child without a Photography/Filmography Child Permission Form on file will not have their image used by SEBC.

While we reserve the right to photograph and record church events, in an effort to respect your privacy, we will strive to adhere to the following guidelines:

- Parents, for an image of your child(ren) to be used, we need your permission.
- No identifying information will accompany photos, including names, addresses, email addresses, phone numbers, family members' names, or schools/workplaces.
- Anyone may request a particular media item which prominently features them be removed from use by submitting a request to the church office.
- If you submit images to be used by SEBC, you are giving the church the right to use the photos. These images must not contain any copyrighted material without permission.
- This policy will be posted to the church website and published periodically in the monthly newsletter.

# Southeast Baptist Church, Greensboro, NC

## PHOTOGRAPHY/FILMOGRAPHY CHILD PERMISSION FORM

WRITE CLEARLY & IN INK

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

Understanding the Photography/Filmography Policy, as legal parent or guardian of the child, I hereby grant permission for images (digital or film photography, video photography, audio recording) of my child to be used and stored for printed and electronic publications (including website and social media) of Southeast Baptist Church (SEBC). Finally, I understand that this Photography/Filmography Permission Form covers activities effective the date of signature. Should I choose to revoke consent at any time, I understand that I will need to complete the Photography/Filmography Child Opt-Out Form and submit it to the church office.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Southeast Baptist Church, Greensboro, NC**  
**PHOTOGRAPHY/FILMOGRAPHY CHILD OPT-OUT FORM**

WRITE CLEARLY & IN INK

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

CHILD'S NAME: \_\_\_\_\_ DOB: \_\_\_\_\_

*SUBMIT INFORMATION BELOW ONLY IF YOU WOULD LIKE TO REVOKE CONSENT PREVIOUSLY GIVEN TO SOUTHEAST BAPTIST CHURCH FOR MEDIA IMAGES OR RECORDINGS OF YOUR CHILD(REN) TO BE USED IN SOUTHEAST BAPTIST CHURCH PUBLICATIONS. I hereby request permission to OPT OUT of images (digital or film photography, video photography, audio recording) of my child(ren) to be used and stored for printed and electronic publications (including website and social media) of Southeast Baptist Church (SEBC). Furthermore, I will notify photographers in my vicinity that I do not wish for my child(ren) to be photographed. Finally, I understand that this Photography/Filmography Child Opt-Out Form covers activities effective the date of signature. Should I choose to allow consent in the future, I understand that I will need to complete the Photography/Filmography Child Permission Form and submit it to the church office.*

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_