



First UU Church of Nashville Media Consent and Release Form

First Unitarian Universalist Church of Nashville (FUUN) hosts live-stream services, religious education programming, fellowship events, social justice initiatives, fundraisers, and weekly worship services in which photos, videos, and audio are taken of members, friends, and guests as they participate in the life of the congregation. We use these images, audio, and videos to promote our organization and its mission in print, on our website, on social media, as well as through a multitude of community-wide advertising platforms.

By signing this form, you grant the First Unitarian Universalist Church of Nashville (FUUN), its partners, agents, representatives, assigns, successors in interest and licensees, to photograph, audiotape, and/or videotape me and grant FUUN and its partners the irrevocable right to use my photograph, audio recording, video recording, or any reproduction or modification thereof (the "Photograph," "Audio," "Video"), in a manner or medium throughout the community an unlimited number of times for advertising, promotion, or any other lawful purpose.

I understand that I will not receive any monetary compensation for the permissions I am granting herein. I hereby waive any right to inspection or approval of the uses to which FUUN may put the photographs, audio, or video. I acknowledge that FUUN will rely on this permission and I hereby release and discharge FUUN from any and all claims and demands arising out of or in connection with the photograph, audio, or video, or the exercise of the permissions granted here, including any or all claims for libel or invasion.

No other identifying personal information about individuals will be published without explicitly states permission to do so in each individual case.

Please check "yes" or "no" for each of the following:

☐ Yes	☐ No	I grant permission for photographs to be collected and used by FUUN.
☐ Yes	☐ No	I grant permission for audio to be collected and used by FUUN.
☐ Yes	☐ No	I grant permission for video to be collected and used by FUUN.

I grant permission to the above checked options with the following restrictions or requests:

Participant Name: _____
Signature: _____
Date: _____ Address: _____
Phone: _____ Email: _____

If the individual is under 18 years of age, please complete the additional information below:

I am the parent or legal guardian of the participant named above, and I hereby sign this Media Consent and Release on behalf of such individuals in accordance with the statements above.

Guardian's Information:
Guardian's Name: _____
Guardian's Signature: _____
Date: _____ Address: _____
Phone: _____ Email: _____