



TRACTION: TRUTH IN ACTION PHOTO RELEASE FORM

Please check on one of the following:

I give my permission for my child to be photographed while attending TRACTION at Fox River Lutheran Church. Child's name will not be used.

I do not give my permission for my child to be photographed while attending TRACTION at Fox River Lutheran Church.

Child's Name _____

Parent/Guardian Name _____

Parent/Guardian Signature _____

Date _____