



ST. PETER'S LUTHERAN CHURCH

211 S. Main Street
North Wales, PA 19454

PHOTO CONSENT FORM

I give my permission for myself and/or my son or daughter's photograph(s) to be used for publication on the St. Peter's Church website and/or in the St. Peter's Church newsletter (Steeple Views).

Signature: _____
(parent or legal guardian)

Printed Name: _____

Name of children/child: _____

Name of adult(s) _____

Address: _____

Phone Number: _____

Email: _____

Date: _____

THANK YOU!

Please return this form to:

Lorraine Daniels
Church Secretary
Phone: 215 699-4604