

## INFORMATION REQUEST

**You are under no obligation to provide any of the information requested below.**

If you choose to provide any of the requested information,

ONLY provide information that you are willing and/or authorized to have released into the public domain.

**PLEASE PRINT ALL INFORMATION**

Last Name:		First Name:		Middle:	Suffix (Sr., II.):
Address:					
City/Town:		State/Province:		Zip/Postal Code:	Country:
Birthdate:	Phone No:	Fax No:	Email:		
Web Site URL:				Links and/or References to Web Site:	
				<input type="checkbox"/> Authorized <input type="checkbox"/> NOT Authorized	
Pictures Use/Reproduction (check one box):		<input type="checkbox"/> Authorized <input type="checkbox"/> NOT Authorized			
Testimonial Use/Reproduction (check one box):		<input type="checkbox"/> Authorized <input type="checkbox"/> NOT Authorized			

### AUTHORIZATION FOR USE OF INFORMATION AND PICTURES

**BEREAN BAPTIST CHURCH OF SHELBY, NC** is hereby authorized to use the above information and items, and to take or permit pictures to be taken of the adult named above for use by **BEREAN BAPTIST CHURCH OF SHELBY, NC** in publications, newspapers, its web site, and/or television for the purposes of public relations for **BEREAN BAPTIST CHURCH OF SHELBY, NC**.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witnessed by