

Media Permission Form

Child's/young person's consent I _____ (insert first name and surname) would like to take part in _____ (name of event) on _____ (date of event). (If relevant please tick the boxes below) ☐ I understand that photographs may be taken during the event, and I give my permission for these to be used in any hard copy/online (delete as appropriate) publications by _____ ☐ I understand that videos may be taken during the event, and I give my permission for these to be used in any hard copy/online (delete as appropriate) publications by □ I understand that updates may be posted on the ____ and/or social network sites during the event, and I give my permission for my images/videos of me (delete as appropriate) to be used. Guardian's consent I agree to allow the above-named child/young person to attend this event during the period _____(insert start date and time) to _____ (insert end date and time), in accordance with the permission granted by (insert name of child/young person). Signed Name (block letters) (Guardian) (Guardian) Relationship to child/young person

Data protection

Signed _____

(Child/young person)

This form will be held on file in accordance with the data protection. The data entered will be used only for the purpose indicated on this form. It may only be accessed by those who have responsibility for managing files or activities.