Name of Activity/Event

Use of Photography and Video Consent Form for Parents or Carers

Name of young person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of birth: \_\_\_\_\_\_\_\_\_\_\_\_

*To be completed by legally recognised parent or carer:*

*\*delete as appropriate*

I consent to \**photography/video*being taken of the child/young person named above for the following purposes:

*Please tick the relevant boxes below:*

* sharing photographs on a church controlled, social media site
* newsletters and updates to Methodist Church audiences
* supply to external media organisations for promotion of the activity
* for the promotion of Methodist church ministry with and amongst children and young people
* I understand that that the images of my child captured in the video recordings and/or photographs will become the intellectual property of the organisation taking them and copyright will be retained by them.
* I agree to comply with the requirements relating to personal video recording/photography in place for the activity.

OR

* I do NOT consent to \*photography/video being taken of the child/young person named above.

I confirm that I have read the information contained within the Use of Photography and Video Policy.

Signature of parent/carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name (in block capitals): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the young person is aged 12 years or older, they should be provided with the information sheet for young people and asked to provide their consent.