**PHOTO/VIDEO CONSENT FORM**

Please complete this form to give us permission to take photographs and videos of your child and use them in our printed and online publications.

I give [**your school name**] permission to take photographs and/or video of my child.

I give [**your school name**] permission to use these images for the purpose of school publicity and in line with school policies and procedures. This might include, but is not limited to:

* Printed materials such as brochures, press releases, posters or the school prospectus
* Online publicity, such as our school website/blog and school social media accounts

**Name of child**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Class/Year group** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of parent/carer**  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of parent/carer** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_