

Child photo / video consent form

We would be grateful if you would fill in this form to give us permission to take photos of your child and use these in our printed and online publicity.

I give **Fitznells** permission to take photographs and / or video of my child.

I grant **Fitznells** full rights to use the images resulting from the photography/video filming, and any reproductions or adaptations of the images for fundraising, publicity or other purposes to help achieve the group's aims. This might include (but is not limited to), the right to use them in their printed and online publicity, social media, press releases and funding applications.

NAME OF CHILD	
NAME OF PARENT / GUARDIAN	
SIGNATURE OF PARENT / GUARDIAN	
DATE	

Your child will only ever be identified by their first name and if you wish to have a photograph removed you can notify us in writing on fitznellsmusic@gmail.com and we will remove it.

- For the purposes of this form, "Fitznells" includes members of staff or appointed photographers, but only with prior permission from the Musical Director Sophie-Lee Colchester