

Parental Photo Consent Form for Children/Minors

Name of Organization: _____

Date and Time of Event: _____

Name of Event & Event Location: _____

Event Coordinator Name and Phone Number: _____

We recognize the need to ensure the welfare and safety of all young people taking part in any activity associated with our organization.

In accordance with our child protection policy we will not permit photographs, video or other images of young people to be taken without the consent of the parents/carers and children. As your child will be taking part in the event specified above, we would like to ask for your consent to take photographs/videos of the event or activity that may contain images of your child. It is likely that these images may be used as

- a record of the activity or the event
- in a written evaluation of the event that will be viewed by

- publicity material for further activities or events on leaflets/websites/magazines
- illustrations of the activities or events in published articles
- future grant applications

We will take all steps to ensure these images are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately you should inform us immediately.

I consent to having my child photographed or recorded for this event.

Child's Name: _____

Parent or Legal Guardian's Name: _____

Parent or Legal Guardian's Signature and Date: _____

(Optional) Consent of a Second Parent or Legal Guardian

Parent or Legal Guardian's Name: _____

Parent or Legal Guardian's Signature and Date: _____