**Photography Consent**

**To be completed by parent/carer**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Parent full name) consent to

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of organisation) photographing or videoing

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of child) under the stated rules and conditions,

and I confirm I have legal parental responsibility for this child and am entitled to

give this consent.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**To be completed by child**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Child full name) consent to

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of organisation) photographing or videoing child

under the stated rules and conditions.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_