

## **FIRST STOP CENTRE**

## Photo and Video Consent /Release Form

Project Title	_ Date
<ol> <li>You hereby give First Stop Centre ("Us") and any third party instructed by us permission to;</li> <li>1.1.photograph and or video you, we will retain these data for 3 years;</li> </ol>	
1.2.consent to your photographs and video to be use magazines, websites, DVD and broadcasts approved Stop Centre and promote our charitable objectives	ed by Us to talk about First
1.3.I understand that I do not own copyright or have other claim over the images or video captured.	e any rights of ownership or
1.4.you may withdraw your consent at any time by on 01376 346535 or email: contact@firststopcentre. It is important to note any consent withdrawn will or captured images or video	e.onmicrosoft.com
Please note:  ☐ We will store a copy of the image(s) and video in	our multimedia bank.
☐ We may use the image(s) or video for print and eincluding, but not limited to, the First Stop Centre we electronic publications, PowerPoint presentations, banners, display panels, fundraising appeal material and any other publications from First Stop Centre.	vebsite and intranet and other posters, folders, leaflets,
$\hfill \square$ We may use the image(s) or video for press and is for our charitable purposes.	media coverage as long as it
This may include passing on copies of the image(s such as local authorities and corporate clients in or work.	
$\hfill \square$ We will not be under any obligation to use all or a taken.	any of the images and video
☐ We may use group images with very general lab session'	els such as 'an activity



L (print your name) confirm that I
am at least 18 years of age and have legal capacity to sign this agreement without the consent or knowledge of any other person.
Signed:Date:
For more details on how we use and look after your personal information, read our privacy policy on our website.
Carer or Parental Consent
confirm that I am, or I have obtained the consent of the parent/carer or person with legal responsibility for any children, young person or vulnerable adults who appear in this image (s) or video(s)
Name of child or vulnerable adult:
Name of parent / guardian/carer:
Relationship to child/vulnerable adult:Address:
Post code: Telephone:
(We request your contact details so we can contact you to obtain consent to publish your name or that of the child or vulnerable adult in any publication or media outlet used.)
Signature of parent / guardian/carer:
Date:
Internal Has Only
Internal Use Only: Name of First Stop Centre contact:
Name and location of shoot:
Name of First Stop Centre contact: