



PHOTOGRAPHY / VIDEO RELEASE FORM

Name of student/s (in block letters please).....
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.....

Name of individual giving consent.....

Status of individual giving consent.....
(i.e. parent, teacher, student. Parent or guardians consent must be given if the subject is under the age of 16)

Home address.....
.....

Home telephone.....

School address.....
.....

School telephone.....

Agreement is given for the above to take part in a photograph / video shoot for *create a future*.

I consent to the full use of the material by this organisation in any form and in any medium which reasonably promotes or advertises their aims. This might include publications of partnership organisations, local, regional, national and specialist media. The photographs / video footage will not be used for any other means.

I agree to notify *create a future* before speaking to the press / broadcast media concerning the photography / video shoot.

The copyright of any material which is generated as a result of this photographic session shall be assigned to *create a future*.
This agreement shall be governed by the laws of England and Wales.

Signed.....
(by parent / guardian if subject is under 16)

Date.....