

FRIENDS OF
BLYTHE HILL
FIELDS



Photo and video consent form

Please fill in this form to give us permission to take photos and/or video of you and/or your child/ren for use in our printed and online publicity.

I give permission to take photographs and/or video of myself and/or my child. I grant 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 aims of the Friends of Blythe Hill Fields. This might include (but is not limited to), the right to use them in their printed and online publicity, social media, press releases, funding applications and kept as a record of events for archive purposes.

Name of adult:.....

Signature of adult: Date:

Name of child/ren:

Name of parent/guardian:

Signature of parent/guardian: Date:

If you have any further questions, please email us on: secretary@blythehillfields.org.uk or head to: www.blythehillfields.org.uk