

STORTH CE PRIMARY SCHOOL
ANNUAL CONSENT FORM
PHOTOGRAPHY AND USE OF IMAGES

Dear Parent or Guardian

During the course of the school year there may be opportunities to publicise some of the activities that your child is involved with, this may involve filming or photographing children for use in local media. As a school we welcome these opportunities and hope that, as parents, you do too. There may also be occasions when we will arrange photography for school purposes i.e. displays and school prospectus/brochures.

Photography or filming will only occur with the permission of the Head teacher and under the strict supervision of a teacher. Where filming or photography is carried out by the news media, children will only be named when there is good reason i.e. prize winning; home addresses will never be disclosed, this is in order to protect a child's identity and reduce the risk of unsolicited approaches to individual pupils.

Whilst positive publicity benefits the school, your child will not be involved without your consent. Images of your child held by the school which are subject to the Data Protection Act 1988 can be viewed upon request.

Please complete the form below, noting that consent may be withdrawn at anytime.

Name of child (block capitals):		
Name of person responsible for child:		
<p>I understand that images of my child may be taken as follows:</p> <ul style="list-style-type: none"> ▪ By the local media in covering school activities that show the school and children in a positive light. These may include new school starters (Reception Year pictures), drama and musical performances, sporting events, prize giving etc. ▪ By photographers acting on behalf of the school for use in displays and publicity material. (Images will be used for a maximum of 2 years and will then be destroyed). The school, for internal displays or use in their school album, may hold images for longer periods. 		
Having read the statement above with regard to consent for images / photographs of your child to be taken and used, please tick the appropriate box.		YES , I give consent for pictures to be taken / printed with child's full name
		YES , I give consent for pictures to be taken / printed without child's full name
		NO , I do not give consent for pictures to be taken and used
Signature of person responsible for the child:		
Relationship to the child:		
Date:		

Please note: There may be other circumstances, falling outside the normal day-to-day activities in school, in which pictures of children are requested. The school recognizes that in such circumstances specific consent from parent / guardian will be required before the school can permit to the filming or photography of children.