

## **PHOTOGRAPHY/FILMING CONSENT FORM**

*For use when photographing or filming under 18s or vulnerable adults – to be filled in by parents / guardians*

Name of Young Person / Vulnerable Adult	
School/College	
Photography/Filming Date/s	
Young Enterprise Activity	Fiver Challenge
Teacher/Tutor Present	
Photographer/Video Company	Young Enterprise

### **Purpose of Photography/Filming & Permission Request**

As part of the Fiver Challenge students have the opportunity to enter competitions where images and video clips form part of the entry. We ask that you complete this form to give your permission or not for your son / daughter / person in your care to be included.

Photos / footage of \_\_\_\_\_ may be used to promote the Fiver Challenge and Young Enterprise including but not exhaustive of; local press, social media, online, promotional materials and internal promotion.

Understanding the sensitive issues that surround the filming and photography of children and vulnerable adults, Young Enterprise will only ask your son/daughter/person in your care to take part [in the activity to be photographed/filmed] if you grant your consent. In order to do this we ask that you please tick the appropriate box below.

Please be aware that the photographs/footage may provide details of the school which your son/daughter attends e.g. school uniforms may be visible and the name of or references to the name/location of the school may appear in the photographs/footage. If you have any concerns around information relating to the school which your son/daughter attends being made available through the photograph/footage, please do not consent to your child's photograph / footage being used.

### **Agreement/Refusal**

☐ **YES** - I agree to my son/daughter/person in my care taking part in the photography/filming as detailed above. I also agree to the use of the resulting photographs/video by Young Enterprise for the purposes of promoting itself and its programmes as set out above.

☐ **NO** - I do not agree to my son/daughter/person in my care taking part in the photography/filming

Signed (parent/guardian)	
Name of parent/guardian (please print)	
Date	

\*\*\*\* One form per student required \*\*\*\*