

EVENT REFERENCE No. EVENT DESCRIPTION		
Permission to use photographs/images/sound recording/film footage - Please fill in A or B as appropriate		
A To be filled in if photograph/ recording is of yourself	I (full name) give permission:	
To be filled in if photograph/ recording is of a child under 16	I (full name) As parent/guardian of (full name) give permission:	
This form grants permission for photographs or other image/voice recording products (DVDs, videos, sound recordings etc) to be used by the county council, the county council's partners, schools and the media, in any publications, promotional material, on websites or on social media.		
Email Address		
Signature	Date	
To be filled in by LCC officer for group activities	I (full name) Infirm that i announced that a photograph/recording was being taken and gave those attending the option to leave the room/area	
This form collects information about you and may be used for marketing purposes. It will not be disclosed to any organisation not associated with Leicestershire County Council except where law requires us to release that information. KD371 July 2D11		

By filling in this form, you're agreeing to your name, contact details and any photographs, sound recordings and video associated with this form, being held by Leicestershire County Council for four years from the date the form was filled in. Your personal details will be accessible only to the Participation Team, any photographs or video/voice recording products will be accessible as mentioned above.

Your name and email address will be stored solely for the purpose of contacting you about this event/project and/or any images/sound recordings/video recordings associated with this form, and will be held electronically in line with the GDPR and Data Protection Act 2018.

Should you wish to contact the County Council regarding this permission statement please contact: rebecca.fisher@leics.gov.uk