

Photography and filming consent form

This form must be completed after reading the Swim England Photography and Filming guidance contained in Wavepower.

The organisation may wish to take photographs or film individual or groups of members under the age of 18 that may include your child during their membership of the organisation. All photographs and filming and all use of such images will be in accordance with the Swim England Photography and Filming Guidance and the organisation's Privacy Policy (available at the website above or otherwise on request).

The organisation will take all reasonable steps to ensure images and any footage is being used solely for their intended purpose and not kept for any longer than is necessary for that purpose. If you have any concerns or questions about how they are being used please contact the Welfare Officer to discuss this further.

As a parent/guardian please complete the below in respect of your child/ren. We encourage all parents/guardians to discuss and explain their choices with their child/ren. Please note that either you or your child can withdraw consent or object to a particular type of use by notifying the Welfare Officer at any time. For the purposes of the organisations record keeping we ask if possible that such requests are made in writing wherever possible.

As the parent/guardian of _____

I am happy for:

[tick appropriate boxes]

Yes	No	Media uses
<input type="checkbox"/>	<input type="checkbox"/>	My child's photograph to be used on the organisations website.
<input type="checkbox"/>	<input type="checkbox"/>	My child's photograph to be used on the organisations social media platform/s.
<input type="checkbox"/>	<input type="checkbox"/>	My child's photograph to be used within other printed publications such as newspaper articles about the organisation.
<input type="checkbox"/>	<input type="checkbox"/>	My child's photograph to be taken by a professional photographer employed by the organisation as the official photographer at competitions, galas and other organisational events.

Yes	No	Training uses (training videos to be deleted once the relevant training is complete)
<input type="checkbox"/>	<input type="checkbox"/>	My child to be filmed by the organisation for training purposes.

Signature _____

Printed Name _____

Date _____

Please return this form to the TBAS Welfare Officer welfare@teambathas.co.uk.