

We would be grateful if you would fill in this form to give HS4L permission to take photos and videos of you for use in our printed and online publicity.

Please tick the appropriate boxes.

☐ I give / ☐ I don't give **consent to be photographed**

☐ I give / ☐ I don't give **consent to to be videoed**

I consent full rights to HS4L for my photograph / video to be used for printed and online publicity, social media, press releases, funding applications and other purposes.

I also agree that I have no monetary rights to the images, and all the rights to the images belong to HS4L.



By reading and signing this, I acknowledge that I understand my rights and have read this form fully.

Signature:

Please print full name: _____ Date: _____

☐ Please tick here if you don't wish to receive event invitations, charity updates and other communication from HS4L