



Seaton Sluice First School

Photographic and Video Consent Form

I (name) _____

Of (address) _____

Being the parent responsible for (child's name) _____

agree ☐

do not agree ☐

that photographs / videos of my child can be used

- Within the school for display
- Within the school as part of lessons
- Within the school, LEA or partner schools of education for training
- In publicity for Seaton Sluice First School including the prospectus

agree ☐

do not agree ☐

that photographs / videos of my child can be used

In the local press

On the school website

This consent is given on condition that personal details of people involved will not be revealed without further permission being sought.

Signed _____

Date _____