

Child/Member Photography Form

Child/Member Photography Approval of Consent Form

Note: this form must be read and completed after reading the ASA/ Team Bath Synchro Club (TBSC) Photography Guidance.

The Team Bath Synchro Club organisation may wish to take photographs of individual and/ or groups of members under the age of 18 that may include your child during their membership of the organisation. All photographs will be taken and published in line with the ASA Photography Guidance. The Team Bath Synchro Club requires parental consent to take and use all photographs.

Parents have a right to refuse agreement to their child being photographed.

As the parent or carer of/ adult member please complete the form below in respect of your child / your children / yourself. Please note you can withdraw your consent in writing to the Welfare Officer at any time should you wish to.

- | | |
|--|--------------------------------|
| <input type="checkbox"/> Take photographs to use on the organisation's secure website: | Consent given/Consent refused* |
| <input type="checkbox"/> Take photographs to use on the club's social networking sites: | Consent given/Consent refused* |
| <input type="checkbox"/> Take photographs to include with newspaper articles: | Consent given/Consent refused* |
| <input type="checkbox"/> Take photographs to use on the organisation's notice boards: | Consent given/Consent refused* |
| <input type="checkbox"/> Filming for training purposes only: | Consent given/Consent refused* |
| <input type="checkbox"/> Employ a professional photographer (approved by the organisation) who will take photographs in competitions/galas/meets/events: | Consent given/Consent refused* |

*Delete as appropriate

Signed (parent/carer):

Print name:

Date:/...../.....

Please return this form to the Welfare Officer in charge.

(Please turn the page to fill the Refusal of Consent Form if you disagree with the above points).

Child/Member Photography Form

Child/Member Photography Refusal of Consent Form

Name of member:

Date of birth:/...../.....

I refuse permission for the taking and/or publication of any images of my child by the organisation's appointed photographer(s) in respect of (activity).

Signed (parent/carer/adult member):

Print name:

Date:/...../.....

Please return this form to the Welfare Officer in charge.