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**Photographic Images of Children – Consent** **Form**

**(updated to satisfy GDPR which come into force 25th May 2018)**

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| --- | --- |
| Child name: | ………………………………………………………………………….. |
| Child class: | ………………………………………………………………………….. |

To comply with the Data Protection bill 2018, we need your permission to photograph or make any recording of your child.

**The table below shows the different ways your child’s image/name may be used. Please tick to confirm your consent or otherwise for each medium, sign and date the form and return it to the school office as soon as possible.**

|  |  |  |  |
| --- | --- | --- | --- |
| **What** | **Where** | **Yes** | **No** |
| Your child’s image and name  | In school*e.g. display boards* |  |  |
| Your child’s name or image*Unidentifiable by full name and photograph combined unless agreed in advance with an adult with parental responsibility* | School publications*e.g. newsletter, DVD* |  |  |
| Your child’s name or image*Unidentifiable by full name unless agreed in advance with an adult with parental responsibility* | School online publications*e.g. website, app* |  |  |
| Your child’s image*Without name* | School social media *e.g. Facebook**(We don’t have this currently, but are collecting consent should we have such in the future)*  |  |  |
| Your child being photographed or filmed*News media may publish pictures along with the child’s full name, but the school will seek an undertaking that a child’s name will not be used if their image is put on the newspaper’s own website.* | External press/media*e.g. newspapers, television images* |  |  |

**Declaration:** I have read and understood the consent asked of me above. My decision on whether to give consent will remain valid throughout my child’s time at the school, and potentially after they have left, unless I notify the school of the contrary in writing. I promise that if I, or members of my family, take photographs or video recordings at a school event, these will be kept for family use only and will not be uploaded to social media.

|  |  |
| --- | --- |
| Parent Name: |  |
| Parent Signature: |  |
| Date: |  |