

Consent to the Safe Use of Images (Photography and Filming)

Data Protection

In accordance with the General Data Protection Regulation 2016 and Data Protection Act 2018, all personal data, including images (photographs and films for example), must be processed fairly and lawfully. To comply with this, we are bound to issue a privacy notice and inform you when:

- Photographs and films will be taken
- Why they will be taken
- What will be done with them
- Who may see them
- Any non-obvious consequences; for example, if the image from photographs and films is going to be used on a website, in a newsletter, or on televised programme.

We will state how long we plan to keep and use the image(s) and will contact you to seek consent if we wish to use the image(s) for another reason than that expressly stated herein.

Privacy Notice

To be completed by the Parish/Religious Congregation/Organisation

Name of parish/congregation/organisation that plans to record images:			
Context for recording images:			
The purpose for recording images is:			
Credit to be linked to images (if any):			
The planned use of these images is:			
Use may include:	<input type="checkbox"/>	Use on web pages:	
	<input type="checkbox"/>	Use in the publication:	
	<input type="checkbox"/>	Used to promote:	

	<input type="checkbox"/>	Used commercially to:	
	<input type="checkbox"/>	Other (must be specified):	
We intend to keep these images for a period of:			
This means that the images will not be used after this date*:	<i>* Unless the terms of use are re-negotiated with the subject(s) in the image(s)</i>		
Should you have any questions or concerns, please contact:			

We will take care to record images that respect the dignity and wellbeing of each individual, and will use secure storage and encryption technology, as well as follow best practice guidelines as laid out in the CSAS e-Safety Guidance in relation to these images. Should you have any concerns about the manner in which we handle your information and are not able to resolve these satisfactorily with us, please contact the [Information Commissioner](#) for advice and to [report a concern](#).

We recognise that there are some reasons why, for their own safety and/or wellbeing, some individuals will not want their images recorded or kept and we will always respect this.

To be completed by the subject of the photo (this includes children where it is deemed that they understand what they are agreeing to. Parents/carers must also give consent if the child/young person is under the age of 16 years).

<input type="checkbox"/>	I give my express consent to being photographed and/or filmed in the course of the activities detailed above.
<input type="checkbox"/>	I understand the ways in which these photographs, films and resulting images may be used, the period of time, and manner in which they will be stored.
<input type="checkbox"/>	I know that it is my right to withdraw my consent at any time, without explanation.
Signature:	
Full Name:	
Date:	

Statement of Consent of parents/carers for children and young people aged under 16 years, or person who has the legal authority e.g. lasting power of attorney for health and welfare, to make the decision on the person's behalf for young people aged 16-18 and adults who lack capacity to consent.

To be completed by the Parent / Carer

Full Name of subject of photograph:	
Date of Birth:	
Full name of person giving consent:	
Relationship to subject of the photograph:	
Work / Daytime Contact Number:	
Home / Evening Contact Number:	
Mobile Number:	
Do you want the child 's or adult's full name credited to their image?	<input type="checkbox"/> Yes <input type="checkbox"/> No <i>NB: this may make them easier to be identified and contacted for nefarious purposes by third parties</i>
Do you have 'parental responsibility' or legal authority to provide consent?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> I have discussed the contents of this form with my child and we are in agreement.	
<input type="checkbox"/> I give my express consent to the person named above, being photographed and/or filmed as detailed in this form.	
<input type="checkbox"/> I understand the ways in which these photographs, films and resulting images may be used and the period of time and manner in which they will be kept.	
<input type="checkbox"/> I know that it is my right to withdraw my consent at any time, without explanation.	
Signature:	
Full Name:	
Date:	