Photo consent form

I voluntarily give **[Business or Organisation Name]** permission to photograph me.

For the purposes of this form, “photographs” include digital and printed images, portraits, candid photographs, screenshots and other visual recordings created during **[Event, Appointment, Activity or Project]**.

I understand that I may decline photography before it takes place. Refusing consent will not affect my ability to receive a service or participate unless photography is an essential and clearly disclosed part of the activity.

Permitted use

I authorize **[Business or Organisation Name]** to use the photographs for the purposes I select at the end of this form.

Permitted uses may include:

- Internal business records
- Staff training and education
- Portfolio examples
- Websites and landing pages
- Social media
- Digital and printed advertising
- Email newsletters
- Brochures, posters and other promotional materials
- Press releases and media publications

The photographs may be published individually or together with other images, text, graphics or branding.

The business will not use the photographs for a purpose that is unlawful, defamatory, misleading or materially different from the permissions granted in this form.

Editing and presentation

I understand that the photographs may be cropped, resized, retouched, colour-corrected or otherwise edited for presentation.

Editing must not intentionally misrepresent me or place me in a false, offensive or unlawful context.

I understand that I may not be able to review or approve every final layout, caption, design or publication before it is used.

Where identifying information is used, it will be limited to the permissions I provide and handled according to the organisation's privacy notice.

Name and identification

Unless I separately agree, the organisation should not publish sensitive personal information such as my address, phone number, identification number or private health information with the photographs.

My name, role, testimonial or other identifying information may only be used where I have agreed to that use or where another lawful basis applies.

I understand that photographs may still make me recognizable even when my name is not included.

Ownership and compensation

I understand that the photographer or **[Business or Organisation Name]** may own the photographs and related intellectual-property rights, subject to applicable law and any separate agreement.

Unless otherwise agreed in writing, I will not receive payment, royalties or other compensation for the permitted use of the photographs.

I understand that I do not gain ownership of the photographs solely because I appear in them.

Online publication

I understand that photographs published online may be viewed, copied, shared, downloaded or stored by other people.

Although the organisation may remove photographs from channels it controls, it may not be able to remove copies that have already been shared, republished, archived or stored by third parties.

The organisation should take reasonable steps to use the photographs only for the purposes authorized in this form.

Duration of consent

This consent remains valid until I withdraw it, unless a specific end date or campaign period is stated below.

Withdrawal applies to future use and does not necessarily require the organisation to recall, destroy or remove materials that were lawfully created, printed, published, distributed or contracted before the withdrawal was received.

Where reasonably practical, the organisation should stop using the photographs in new materials after receiving a valid withdrawal request.

Withdrawing consent

I may withdraw my consent for future use by contacting:

[Business or Organisation Name]
[Email Address]

My withdrawal request should identify me and, where possible, describe the photographs or activity involved.

I understand that withdrawal may not affect:

- Uses made before the request was received
- Printed materials already produced or distributed
- Content already shared by independent third parties
- Records that must be retained for legal, insurance or safeguarding purposes
- Uses supported by another lawful basis under applicable law

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Privacy and recordkeeping

I understand that the organisation may collect and retain my contact details, consent selections and signature to:

- Record and manage my permission
- Identify the photographs covered by this form
- Respond to questions or withdrawal requests
- Demonstrate compliance with privacy and consent requirements
- Manage complaints, disputes or legal claims

My information will be handled according to the organisation’s privacy notice and applicable data-protection laws.

Access to this form and related records should be limited to people who reasonably require it.

Participants under the legal age of consent

Where the person being photographed cannot legally provide their own consent, this form must be completed by a parent, legal guardian or another person legally authorized to consent on their behalf.

The person signing confirms that they have the authority to grant the permissions described in this form.

The organisation must still consider the wishes, dignity, privacy and safety of the person being photographed.

Release of claims

To the fullest extent permitted by applicable law, I release **[Business or Organisation Name]**, the photographer and their employees, contractors and representatives from claims arising solely from the authorized creation and use of the photographs in accordance with this form.

This release does not apply to:

- Uses outside the permissions granted
- Fraud or intentional misconduct
- Defamatory, unlawful or seriously misleading use
- Gross negligence or reckless conduct
- Violations of mandatory privacy, consumer or personality rights
- Any liability that applicable law does not permit to be excluded

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Final declaration

By completing and signing this form, I confirm that:

- I have read and understood the form.
- I understand how the photographs may be used.
- I understand that published photographs may remain accessible online.
- I understand how to withdraw consent for future use.
- I am providing consent voluntarily.
- I am legally able to provide this consent or am authorized to provide it on behalf of the person being photographed.
- I understand that this form does not remove rights or protections that cannot legally be waived.

Participant completion

Participant or parent/guardian details

First name *

Last name *

Phone

Email *

☐ I have read and understood the Photo Consent and Release Form above. I confirm that I am authorized to provide this consent and agree to the uses I selected. *

Signature *