

This form is to be completed by individuals being asked to participate in the production of University video, audio or photographic work.

I consent to the capture of:

Still images (photographs) Moving images (film/video) Audio recordings

I accept that the subsequent use may be in a number of media, including but not limited to print, digital, online and electronic use by Edge Hill University (the 'University') and/or by agents authorised by the University.

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Please complete the following using BLOCK CAPITALS

Name: _____ D.O.B. DD / MM / YYYY

Address: _____

_____ Postcode: _____

Email: _____

Telephone: _____

Course/area of study: _____
(if applicable)

Signature: _____ Date: _____

To be completed by a parent/guardian if under 16 years of age.

Data protection notice
The University will process this personal data in the making of images(s) and/or recording(s) available for us for educational and/or marketing purposes in appropriate file formats via web-based and/or other digital and/or print methods.
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- Editing may be required by the University or by agents authorised by the University for quality or technical purposes;
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Edge Hill University is committed to processing information in accordance with the Data Protection Act (1998). The personal data collected on this form will be held securely, kept according to JISC record retention guidelines and will only be used for administrative purposes.

If you have any queries about this form or wish to update your personal details please contact Corporate Communications via **visual-marketing@edgehill.ac.uk** in the first instance.

Please send all completed forms to the Visual Marketing Officer, JD20, Main Building.

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For official use: Edge Hill University staff to complete this section using BLOCK CAPITALS

Project Name: _____ Project lead: _____

Department: _____ Contact details: _____