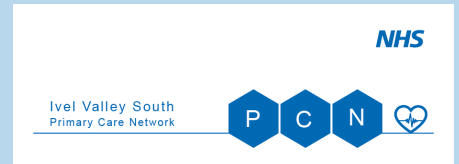


# Photograph/film permission form



We sometimes take photographs or video footage for public information and publicity purposes. This images/material may appear in our printed publications, on our website, or both. We may also send them to the news media.

If you consent to give Ivel Valley South Primary Care Network and Dementia Interpreters, permission to use case study material or images of you please complete and sign this form

Please note:

- We will not include names in photos or text
- We will not include any of your contact details.

**I have read and understand the conditions before ticking and signing the below.**

- ☐ Consent to use images of you in our publicity material, including printed publications, videos, our facebook or LinkedIn pages.
- ☐ Consent to send images of you to news media (usually the local press local newsletters)
- ☐ Consent to give images of you for their own use to Ivel Valley South Primary Care Network and Dementia Interpreters?

Participant name

Date

Signature

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## FOR INTERNAL USE

Event / location

Date

☐ Photo

☐ Video

Staff memeber Signature

Date