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**WOOL WI**

**Photography/video consent form**

We would be grateful if you would fill in this form to give us permission to take photos of you and use these in our printed and online publicity.

I give permission to take photographs and / or video of me.

I grant full rights to use the images resulting from the photography/video filming, and any reproductions or adaptations of the images for publicity or other purposes to help achieve WOOL WI’s aims.

This might include (but is not limited to), the right to use them in their printed and online publicity, social media, and press releases.

Name

Signature

Date