## Wise_Owls_logo_4[1]

**Parent/Carer & Young person Consent to the Safe Use of Images**

**(Photography and Filming)**

**The General Data Protection Regulation (EU 2016/679) GDPR**

In accordance with the General Data Protection Regulation, all personnel 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 we plan to use such images and will seek consent, both by this form and your child registration document.

**Privacy Notice**

Name of Organisation: Wise Owls Care Club Ltd

Context for recording Images: Before and after school care.

The purpose for recording images is: To celebrate the activities of the children.

Credit to be linked to images: Wise Owls Care Club Ltd

The planned use of these images is: EYFS Observations, Club Facebook page, Club website and Club newsletter

We intend to keep these images for a period of: Indefinitely, if you wish for a particular photograph to be deleted please contact a member of the club staff.

Should you have any questions or concerns, please contact: The Manager, Wise Owls Care Club on 07704 685428 or email; [wiseowlscareclub@hotmail.co.uk](mailto:wiseowlscareclub@hotmail.co.uk).

We will take care to record images that respect the dignity and wellbeing of each child and will use secure storage and encryption technology, as well as follow best practice guidelines. Should you have any concerns about the manner in which we handle you information and are not able to resolve these satisfactorily with us, please contact the Information Commissioner for advice.

**Statement of Consent**

(To be completed by the Parent/Carer)

|  |  |
| --- | --- |
| Child’s Full Name: |  |
| Date of Birth: |  |
| Parent/Carer’s Full Name: |  |
| Relationship to child: |  |
| Work/Daytime Contact Number: |  |
| Home/Evening Contact Number: |  |
| Mobile Number: |  |
| Do you want your child’s full name credited to their image? | qYes qNo NB: *this may make them easier to be identified and contacted for nefarious purposes by third parties.* |
| Do you have Parental Responsibility? | qYes qNo |
| q I have discussed the contents of this form with my child and we are in agreement. | |
| q I give my express consent to my child, named above, being photographed and/or filmed as detailed in this form. | |
| q I understand the ways in which these photographs, films and resulting images may be used and period of time and manner in which they will be kept. | |
| q I know that it is my right to withdraw my consent at any time, without explanation. | |
| Signature: | |
| Parent/Carer’s Full Name: | |
| Date: | |

*Form to be retained in accordance with the setting record retention schedule.*