

Oral Consent Form

Name of the project: _____

Name of the photographer or recorder: _____

Photographer's address: _____

(Insert the name of the person to be photographed/ recorded.)

_____ has orally agreed to have their *photograph taken / *be videoed.

Contact tel. no: _____

Please tick the correct box

	Yes	No
In accordance with the Data Protection Act 1998, I have explained that: We may use these images in printed publications produced by Wakefield MDC, for promotional purposes.		
We may use these images on our website, and it is understood that websites can be seen throughout the world and not just in the United Kingdom, where UK law applies.		
We may distribute these images to the media.		
May we use these images in promotional videos?		
This form is valid for *two years from the date of signing / *for this project only.		
We will not re-use any images *after this time / *after the project is completed. Your consent automatically expires at that point.		
We will not include details or full names (which means first name and surname) of any person, in an image on video, on our website or in printed publications, without good reason. For example, we may include the full name of a competition prizewinner if we have their consent. However, we would not include the full name of a model used in promotional literature.		
We will not include personal e-mail or postal addresses, or telephone or fax numbers, on our website or in printed publications.		

Your signature: _____ Date: _____

*Please delete the options that do not apply.