

Sisters of Compassion Filming Consent Form

SISTERS OF COMPASSION	Filming material for promoting the Cause of Venerable Suzanne Aubert. This material will also be on the Compassion websites, printed material and social media pages and used promotionally.
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In accordance with our child and general personal protection policies we will not permit photographs, video or other images of anyone to be taken without their consent. Children under the age of 16 require parental consent and all other persons aged 16 and over must consent as below.

The Sisters of Compassion will take all reasonable steps to ensure these images are used solely for the purposes they are intended. If you become aware that these images are being used inappropriately you should inform the **Sisters of Compassion** immediately.

Consent information:	
<i>To be completed by the parent of a child under the age of 16 years:</i>	
I give permission for:	
<ul style="list-style-type: none"> • My child's photograph and filmed material to be used by the Sisters of Compassion for the purposes explained to me and without monetary or other compensation; • The material filmed to be used within other printed publications of the Sisters of Compassion; • My child's photograph and videos of my child to be used on the Sisters of Compassion websites; • My child's photograph and videos of my child to be used on Sisters of Compassion social media; • I can confirm that I have read, or been made aware of how these images or videos will be stored by the Sisters of Compassion. 	
Signature of parent/guardian:	Print name of child:
Date:	
<i>To be completed by all others:</i>	
I give permission for:	
<ul style="list-style-type: none"> • My photograph and filmed material to be used by the Sisters of Compassion for the purposes explained to me and without monetary or other compensation; • The material filmed to be used within other printed publications of Sisters of Compassion; • My photographs and videos to be used on Sisters of Compassion websites; • My photographs and videos to be used on the Sisters of Compassion social media pages; • I can confirm that I have read, or been made aware of how these images or videos will be stored by the Sisters of Compassion. 	
Signature of Participant:	Print name of Participant:
Date:	