A close up of a sign

Description generated with very high confidence, Picture**Publicity Consent Form**

In order for us to continue our work with young people, we promote our services to attract sponsors and donations. Promotional activities are more effective when supported by photographs and young people’s accounts of their experiences however it is vital we protect our young people, our members, our supporters and ourselves.

 In line with the Data Protection Act, we will only pass your information on to third parties with your consent. You can also write to us if you would like to see any information we hold about you.

It would be greatly appreciated if you would read the form below, and indicate any publicity you are happy to be involved in. **If you are under 16, a parent or guardian must give their consent.** If you would like to see examples of promotional materials first, please contact us to let us know. You can also revoke your consent at any given time by emailing us at  [theteam@thekeyuk.org](mailto:theteam@thekeyuk.org) and requesting so.

 Note to Key facilitator: You must verbally explain this form to the young person so they know what they are agreeing to.

**Publicity consent**

1. May The Key use your photo/video in published materials including our e-newsletter, website, social media?

**Yes        No**

1. May The Key pass your story and photo/video on to the media (for example local newspaper, TV or radio station)? If used by the media The Key will endeavour to contact, you to let you know where this will appear.\*

**Yes        No**

\*Whilst The Key makes every effort to ensure that all media coverage portrays interviewees in a positive way, The Key does not have final control over how a journalist may portray you.

1. The Key gives stories and case studies to potential funders and business partners to help them envisage the work we do. Would you be happy for us to pass on your story and photo/video to these organisations?

**Yes        No**

**Your Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your signature:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Parental signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**