**Safeguarding Policy - Appendix 2**

**- Young person/vulnerable adult photo/video consent form**

We would be grateful if you would fill in this form to give us permission to take photos of you, the child /children/vulnerable adult(s) in your care and use these in our printed and online publicity. We will not use the person(s) concerned name(s)

I give permission to take photographs and/or video of the child/children/vulnerable adult(s) in my care as well as myself.

I grant full rights to use the images resulting from the photography/video filming, and any reproductions or adaptations of the images for fundraising, publicity or other purposes to help achieve the Scottish Jewish Heritage Centre’s aims. This might include (but is not limited to), the right to use them in their printed and online publicity, social media, press releases and funding applications.

**Name(s) of child /children/vulnerable adult(s)/group (e.g. school and class)**

 – please add separate sheet if necessary

……………………………………………………………………………………………………………………….

……………………………………………………………………………………………………………………….

……………………………………………………………………………………………………………………….

……………………………………………………………………………………………………………………….

**Date**

.………………………………………………………………………………………………………………………

**Name of Parent/Responsible Adult/Carer/ Legal Guardian**

……………………………………………………………………………………....................................

**Signature of Parent/Responsible Adult/Carer/Legal Guardian**

……………………………………………………………………………………………………………………….