



## Photographic/Video Agreement Form

To be completed for any person taking photographs or recording images at an event

Name:
Address including full postcode:
Home Tel. No:
Mobil:
Email address:

Event:
Venue:
Date:

I wish to take photographs or recorded images at this event. I agree to abide by the Event Organisers guidelines and confirm that the photographs or recorded images used will only be used appropriately.
Signed:
PRINT NAME:
Date:

Please complete and return to the Event Organiser