

# MODEL RELEASE FORM

USE OF PHOTOGRAPHS AND/OR VIDEO - FORM FOR INDIVIDUAL CONSENT

## PERMISSION:

I hereby consent to the use of photographs and/or video of myself, taken by members of Bucks Student' Union, or by agents authorised on behalf of Bucks Student' Union.

Please tick box if you **do consent** to permission:

## FURTHER PERMISSION:

I further consent to the use of the images/video in any current or future, official Union publications and in Union publicity material, including, but not limited to, the Membership Guide, promotional materials, annual reports, newsletters, videos, website and other online digital content for as long as Bucks Students' Union deems useful.

Please tick box if you **do consent** to further permission:

INDIVIDUAL'S NAME:

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SIGNATURE:

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EMAIL ADDRESS:

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DATE:

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