

# Film and Photographic Stills Consent Form

To be completed by individual(s) (parents/guardians if subject is under 18 years of age) before film or photographs are taken.

Film Director of **(Insert your Name or Company Name here)**  
Film Project name

.....  
Signature \_\_\_\_\_ Date \_\_\_\_\_  
.....

I have fully discussed the content of this form with the person(s) mentioned below.

**Person(s) in film and photographic stills**

I hereby grant **(Insert your company name here)** the right to use the film and or photograph(s) resulting from the film shoot, and any reproductions or adaptations of the film and or photograph(s) for all general purposes in relation to **(Insert your company name here)** work including, without limitation, the right to use them in any publicity materials, websites, books, newspapers and magazine articles whenever **(Insert your company name here)** chooses to do so.

Name (please print)  
.....

Address  
.....  
.....  
.....

Signature.....

Date.....

**Name and address of parent/guardian if person to be filmed and or photographed is under 18 years of age**

Name (please print)  
.....

Address  
.....  
.....  
.....

Signature.....

Date.....