

Integrated Management System	Ref MR35	
<b>Consent Form – All media types</b>		
Version: 4.0	Date: August 2021	Page 1 of 2

# CONSENT FORM

## Waste & Resources Action Programme (WRAP)

Second floor,  
Blenheim Court,  
19 George Street,  
Banbury, Oxon.  
OX16 5BH  
[wrap.org.uk](http://wrap.org.uk)



To help us raise awareness about our work we capture photographs, audios (voice-overs), videos and case study information from the people we work with and share them through our media and communication systems. We share information about our work through our website, through printed materials, television, fundraising materials, and social media channels. This can inspire others to support us by raising money, or campaigning with us to impact climate change.

This form allows you to give us your consent to take [photograph, audio, story, or video] or information about you or your child and your/their situation. If you are not sure about giving consent or how your information might be used including withdrawing your consent at any time, please ask our representative or contact us through [insert email].

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Name of person featured (please print)

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Street address

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City, county, postcode

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Country

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Telephone / Email address

With respect to the [photograph, audio, story or video] in which I am featured, I irrevocably grant to WRAP the right to use and publish, and any parts of it (reproductions), throughout the world in all and any media, including in WRAP's printed publications, presentations, promotional or fundraising materials, social media channels, in the advertising of WRAP's goods or services or on WRAP's websites, and also to permit WRAP to grant permission for others to use the [photograph, audio, story or video] in accordance with the guidelines specified by WRAP to help achieve WRAP's aims.

I hereby waive my right to inspect or approve any copy that is used in connection with the [photograph, audio, story or video] and release and discharge WRAP and the photographer or editor from any and all claims arising out of the use by WRAP and by any other organisation or person to whom WRAP gives permission to use the [photograph, audio, story or video] for the purposes described above, including, but not limited to, any claims for libel and invasion of privacy.

I understand that I will not receive compensation for the use of the [photograph, audio, story, or video] in any form. I acknowledge that all right, title, and interest, including copyrights, in the [photograph, audio, story or video] shall be vested exclusively in WRAP.

*This document is uncontrolled if printed*

**DATA PROTECTION:**

The [image, audio, story, video, email, personal data] you provide us with will only be used by WRAP as specified above, and never supplied to third parties without your consent, unless we are legally obliged to. We will use your [image, audio, story, video, email, personal data] for [uploading to our website, social media, sending you an email] and hold it for [12 months]. After [12 months] your data will be removed.

Please sign below as applicable:

**ADULT SIGNATURE:**

I am an adult and have read the foregoing and fully understand and agree to its content.

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<b>Name</b>	<b>Contact details [Telephone / Email address]</b>
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<b>Signature</b>	<b>Date</b>
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**ON BEHALF OF A CHILD/MINOR:**

As parent/guardian/responsible adult of the minor featured, I have read the foregoing and fully understand and agree to its content on behalf of the minor.

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<b>Name</b>	<b>Contact details [Telephone / Email address]</b>
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<b>Signature</b>	<b>Date</b>
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Relationship\* Mother/Father/Guardian/Responsible Adult (\*Delete as appropriate)

**ON BEHALF OF A VULNERABLE ADULT:**

As parent/guardian/responsible adult/caregiver of the vulnerable adult featured, I have read the foregoing and fully understand and agree to its content on behalf of the vulnerable adult.

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<b>Name</b>	<b>Contact details [Telephone / Email address]</b>
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<b>Signature</b>	<b>Date</b>
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Relationship\* Mother/Father/Guardian/Responsible Adult/Caregiver (\*Delete as appropriate)

Please return this form to [insert email or address details].

**FOR WRAP PERSONNEL:**

This form MUST be completed by people who appear in a photograph, audio, story, or video where their face or voice is recognisable. If more than one person/face appears in, this form should be copied and completed by all the people who are featured. If the people featured are minors (aged under 18) or a vulnerable adult the form should be completed in full and signed by either a parent, guardian or other adult or caregiver who is responsible for them.

If the consent form is not completed, the photograph, audio story or video will not be useable.

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