

# Roman Catholic Diocese of East Anglia



Form Ref: Photo 1



## CONSENT TO DISPLAY OF PHOTOGRAPHS IN CHURCH/CHURCH BUILDINGS

PARISH \_\_\_\_\_

I hereby give my consent to allowing a photograph of \_\_\_\_\_ (name of child/young person) to be displayed in \_\_\_\_\_ (location) for the period of \_\_\_\_\_ after which it will be destroyed/be returned to me (Delete as appropriate)

Signed \_\_\_\_\_ (parent's signature)

Name \_\_\_\_\_ (please print) Date \_\_\_\_\_

Signed \_\_\_\_\_ (child's signature)

Name \_\_\_\_\_ (please print) Date \_\_\_\_\_