



## MEDIA PERMISSION FORM

\_\_\_\_\_ (Club/Society)

\_\_\_\_\_ (Area of NAFAS)

Dear

We hope you will agree to photographs being taken during your Demonstration/Presentation/Day School to us, so that they can be included on our website and/or Facebook pages. (Photos and write-up of the demonstration only to appear, no personal details will be included, unless requested.)

Please tick as appropriate  YES  NO

I am happy for **all/two** (*delete as appropriate*) of the designs I make today to be photographed and agree to their inclusion on your website and/or Facebook pages, together with a photograph of myself. I also agree that such photographs may be used in the future in any other media, provided I am accredited as the designer, whether electronic or in print, and that the copyright for all photographs shall remain with the photographer.

Please tick as appropriate  YES  NO

I would like a contact telephone number included in the website report (not Facebook).

Any other comments:

Your Details (For our use only, not for publication):

NAME (Please Print) \_\_\_\_\_

ADDRESS \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

CONTACT TELEPHONE NUMBER \_\_\_\_\_

DATE OF EVENT \_\_\_\_\_

TITLE OF DEMONSTRATION/PRESENTATION/DAY SCHOOL  
\_\_\_\_\_

SIGNATURE \_\_\_\_\_