



Parkinson's Care and Support UK (PCSUK) Client photo / video consent form

We would be grateful if you would fill in this form to give us permission to take photos/videos of you and use these in our printed and online publicity.

I give **Parkinson's Care and Support UK**, permission to take photographs and / videos of me.

I grant **Parkinson's Care and Support UK**, full rights to use the images resulting from the photography/video filming, and any reproductions or adaptations of the images for fundraising, publicity or other purposes to help achieve the group's aims. This might include (but is not limited to), the right to use them in their printed and online publicity, social media, press releases and funding applications.

Name	
Surname	
Signature	
Date	