



KETTERING TANG SOO DO ASSOCIATION

Consent Form for the use of photography of children and young persons

Class: _____ Instructor: _____

Name of Child: _____

Association Number: _____

I _____ being parent/guardian of
_____ (name of child), consent to their activities in
the Martial Arts being photographed and/or videoed and for these images to be displayed.

In promotional material i.e. leaflets, Club posters

On Club website

(please tick)

Signed: _____

Please print name: _____ Date: _____

For full copy of Association policy & guidelines go to www.ketteringtangsoodo.com