



# City College Birmingham Photograph Release Form

I Student Name \_\_\_\_\_ Yr 10/Yr 11 (please circle)

hereby consent to City College, Birmingham using, reproducing or publishing the whole or part of

1. any photograph of which I am a subject
2. information on my involvement in College classes and activities

in any manner or form with whatever effect and in any medium (including on a website or on a CD ROM) either separately or together with other material, for advertising, promotion or course delivery for City College Birmingham. This information will only be used for City College purposes and by City College.

I understand that no personal information relating to me will be included in any of the materials produced, and that this agreement does not affect the college responsibilities under the Data Protection Act (1998).

Signed (student) \_\_\_\_\_ Date \_\_\_\_\_

Signed (Parent / Guardian/Carer) \_\_\_\_\_