

## Photo/video consent form

Child's name: \_\_\_\_\_

Parent/guardian name: \_\_\_\_\_

Parent/guardian phone number: \_\_\_\_\_

Parent/guardian signature: \_\_\_\_\_

School name (optional): \_\_\_\_\_

For publicity purposes, [your organisation's name] may wish to take photos/videos of your child at the Engineers Week event they are attending on [date]. Please fill in the details above, along with your signature, if you give consent for these photos/videos to be used for media purposes or on websites, publications and/or social media associated with the above organisation and/or with Engineers Ireland, Engineers Week and/or the STEPS programme.

**For further information, please contact:**

Your Organisation  
Representatives Contact Details

Alternatively, please email Anne Marie Clarke, Events and Press Officer at Engineers Ireland via [aclarke@engineersireland.ie](mailto:aclarke@engineersireland.ie)

