

Browick Road Primary and Nursery School

Photographs and Video Consent Withdrawal Form



Achieving Success Together

I wish to withdraw all previous consent granted for any purpose of my / my child's photographs.

I understand that a new consent form must be completed in order to provide consent for any specific purpose.

I have read and understood the information.

Pupil / Employee Name	
Name of parent/carer (in the case of a pupil)	
Signature of parent/carer/employee	
Date:	