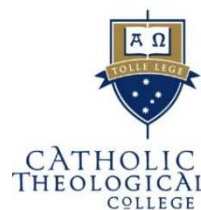


Permission Form for Name, Image and Footage



Name (please print in capital letters) _____

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Please tick ONE of the boxes on the left, then sign the form.

	<p><u>I give permission</u> for Catholic Theological College and the University of Divinity to:</p> <ul style="list-style-type: none">• photograph, record, and film me for promotional, educational and other purposes associated with the work of the College and the University; and• publish my name, my image, and audio/video footage involving me in their online and printed promotional and educational materials (including their publicity, their news items, their resources for services and graduations, their websites, their Facebook pages and other social media, and the CTC Handbook); and• use my image and audio/video footage involving me in their online and printed promotional and educational materials without acknowledgement, remuneration or compensation. <p>I understand and agree that if I wish to withdraw this authorisation it is my responsibility to notify Catholic Theological College.</p>
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