**Photography/Video Consent** 

**University College Dublin**

*(Version 1.1\_2020)*

**Information for Participants (to be kept by participants)**

UCD seeks your consent for the use of photographs and/or video recordings, including images of you, for the purpose of promoting the University. This consent applies to images/videos taken by or on behalf of UCD. In either scenario UCD remains the organisation responsible for the personal information you provide to us.

The images taken can be used in print and digital media formats, including print publications, websites, e-marketing of the university, posters, banners, advertising UCD in films, and for UCD social media campaigns. Any content on websites will be accessible globally. This means that in some countries outside Europe, where websites might be accessed, the level of protection of your privacy rights might be less than in the EEA.

Any contact details we ask you to provide are for administrative purposes of the University only and will not be used in our publications or passed on to third party contractors.

**Your rights**

You have the right to know what images/videos we have about you and request a copy. You have the right to request corrections of incorrect information, or deletion of the information no longer required.

You can ask us to stop using your images at any time. In this case we will not use them in future publications. If you would like to withdraw your consent for future use, please email comms.medicine@ucd.ie

Some images or recordings you are part of may be kept permanently once they are published, as they will continue to appear in publications already in circulation.

If you have concerns about your rights as participant, you can contact the UCD DPO by email gdpr@ucd.ie.

If you are not satisfied with our response or believe we are not processing your personal data in accordance with the law, you can complain to the Irish Data Protection Commission. For more detail see: <https://www.dataprotection.ie/>

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**University College Dublin**

*(Version 1.1\_2020)*

**Proof of Consent (to be kept by UCD)**



I confirm that I have read and understood the information provided to me by UCD.



I consent to the use of my images as outlined in the information provided by UCD

Photo / video: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

UCD representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Print name and sign on behalf of UCD)

Name of participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Print name of person consent given applies to)

Signature of participant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If participant is over 18 years of age)

Parent name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (if under 18, name and signature of parent or guardian required)

Preferred contact details

for UCD use: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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