**Consent for Publicity – Extension of Permissions**

Thank you for allowing us to share your interview/photos as part of our marketing literature. Sharing your real experiences helps to encourage existing and potential supporters, and also raises awareness of the care and support available at [name of hospice].

We will only keep your photos/interviews for two years. After which time we will ask for your permission to continue to hold and use your photos/interview for our marketing literature, such as; our social media channels, our website, during talks and presentations, in our supporter magazine, newsletters and leaflets, with existing/potential funders such as Trusts and Foundations, and media relations.

You or your next of kin/relative/representative can contact [name] at any point and ask us not to use the photograph/interview again.

Please remember that once your photo or interview is published and in circulation (for example on the internet or in a newspaper) it may be copied and used by others. If you or your next of kin ask us not to use the photos/interview, we will not use them again and will do our best to stop others doing so, but we cannot guarantee this.

**If you have any questions or concerns, please contact a member of the Marketing and Communications team below.**

|  |  |  |  |
| --- | --- | --- | --- |
| **complete**  | **complete** | **complete**  | **complete**  |

**Personal information**

Name of patient/child ………………………………………………………….. Date of birth ………………

Name of person giving consent on behalf of a patient/child ……………...…………………………………

Relationship to patient/child ……….………………………………………….. Date of birth ………………..

**Contact details of patient/child/next of kin** *(delete as applicable)*

Title ………………. Name …………………………………………………………………..

Address …………………………………………………………………………………………….

 …………………………………………………………………………………………….

Postcode …………………………………………………………………………………………….

Contact no …………………………………………………………………………………………...

E-mail address ……………………………………………………………………………………………

**Terms of use**

[insert hospice name] may share your/your child/your relative’s photo/interview for promotional purposes across a range of platforms and materials. Please tick those you consent to be featured in or comment below.

[x]  Charity publications such as newsletters/magazines, direct mail, leaflets and the Impact Report

[x]  [insert hospice name] social media pages including Facebook, Twitter, Instagram, YouTube and LinkedIn [x]  Media and press articles

[x]  [insert hospice name] website ([link](http://www.havenshospices.org.uk)) and eNews

[x]  Fundraising communications, including; talks, presentations, thank you letters etc.

[x]  I give consent for [insert hospice name] to share my picture/interview with hospice sector third parties (i.e. Hospice UK)

[x]  I give consent to all of the above

|  |
| --- |
| **Comments** |

**Declaration**

I have read and understood the above and I give permission for [insert hospice name] to use my/my child/my relative’s photos/interview for the next two years

Signature ……………………………………………………………….

Name ……………………………………………………………….

Date ……………………………………………………………….