

Little Villagers (LVOOSCP)
Community Wing
Livingston Village Primary School
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Little Villagers Parental Consent Form for the recording of video and photography.

By signing this form I give permission for my son/daughter to be recorded either on video or by photograph.

This will be used solely for recording activities taking place during time with Livingston Village Out of School Care Project and may be used for promotional purposes.

I hereby give my consent by signing the appropriate section of the Registration Form.