



Request For Permission To Use Camera and Video Equipment

This form must be completed by individuals seeking permission to use camera or video equipment.

Section A

To be completed by the Applicant

Name:	Designation:
Address:	Postcode:
Venue/event:	Date:
Purpose:	

I declare that the pictures/film(s) produced will not be altered in any way without prior written permission of the person(s) concerned. I understand that I may only use the pictures/film(s) for the purpose stated above. I have read and agree to abide by the **Scottish Volleyball Association's Safe in Care Guidelines** and [Child Protection Policy](#).

Signature: _____ **Date:** _____

Section B

For Official Use Only

Application APPROVED / REFUSED (delete as appropriate)

Signed:	Date:
Print Name:	Designation:
Reason for refusal:	

Now complete "Notification to Applicant" form, and keep a copy of this form.