



CONSENT FORM

Chat over Chai produces a range of communications resources to show what we do. We like to share the experiences of real people who are using our services in our communications as it helps to demonstrate the difference our work is making. By completing this form, you give us permission to use your story in our communications for the next decade. Thank you for your help.

Full name			
Address			
		Postcode	
Telephone			
Email			

What will my story be used for? (Please tick the options you are happy with)

- Presentations:** Chat over Chai's internal and external presentations
- Websites:** Chat over Chai's website and intranet
- Social media:** Chat over Chai's social media pages on Facebook and Instagram
- Publications:** Chat over Chai's leaflets, posters, newsletters and other marketing materials
- Print and online media:** National, regional and local papers; magazines and news sites
- Television and radio:** National and regional television; national, regional and local radio

Can I remain anonymous?

You can choose to have your real name published with your story or remain anonymous (in which case, we will use a false name). Please tick one of the following options:

I am happy for my real name to be used I do not want my real name to be used

Please tick this box if you do NOT want to be featured in imagery or video footage

Are there any identifying features you do NOT want included in our communications work? *For example, your location or the age of your children*

Please let us know if there are any ways in which you do NOT wish to be represented or described:

I am happy to give my permission

Please sign this form to show you are happy to give permission for your story to be used by Chat over Chai for the purposes outlined above. Your story will not be used or stored for any longer than [period of time you will use and store their story for], unless you ask us to stop using it before then.

Signature Date

If you are under 18, we need written permission from a parent, guardian or responsible adult.

Signature of parent/guardian Date

Data protection: The information that you provide here will only be used to contact you about sharing your story in our communications work. We will not pass the details recorded on this form on to any other organisation without your permission. We will not store your data for any longer than [period of time you will store their data].

Please return your completed form to Sandra Hall, chairperson, Chat over Chai, Havelock Centre, 324 Fawcett Rd, Southsea, Portsmouth, Southsea PO4 0LQ. If you have any questions about the form, please contact Sandra on .