



SOCIAL MEDIA
CONSENT FORM



Social Media Consent Form

Club/Organisation Name: _____

Person's Name: _____

In accordance with the Mountaineering Ireland Social Media Policy, (*insert club name*) will not permit personal details, photographs, or videos to be taken without consent of the individuals.

If at any time, the individual wishes images, or their details to be removed from (*insert club name*) social media page(s) the administrators should be contacted as per the Mountaineering Ireland Social Media Policy. This information should be removed within seven days.

To be completed by individual:

- I consent to (*club name*) using my name on social media.
- I consent to (*Club name*) taking photographs or videoing me.
- I confirm that I have been made aware of how the club will use these images or videos and how these images or videos will be stores within the club.
- I confirm that I have read or been made aware of the Mountaineering Ireland Social Media Policy and Filming and Photography Policy.

Signature of the individual:

Print name of the individual:

Date:

To be completed by the Club Chairperson:

Signature of Club Chairperson:

Print name of Club Chairperson:

Date: