Video Release Form (Non-Fee) Video Ref:



This form gives consent for Queen Mary University of London to use the video/s of the person(s) named below for informational and/or publicity purposes as stated. It should be signed by the person(s) concerned or by an authorised Carer or Guardian on their behalf before the video is made.

Full Name				
Address and Contact Details				
Telephone No.	E-mail Address			
Details and purpose of the video recorded:				
Date of recording: Venue/Loc	cation:			
QMUL Contact	The second of th	20.4		
Note that a contact point within QM is required for any video recording that will be uploaded to QMplus Media. For example, in the case of a non-QMUL member, the organiser of the video is the QM contact. In				
some events, these may be the same person.				
	il address of contact:			
Purposes for which permission is requested				
To make publically available works including (but not limited to) electronic files, screenshots on				
leaflets/posters, display units, corporate plans and other				
seen fit by Queen Mary University of London. The use will remain non-commercial and the QMUL retains full ownership rights over the recordings.				
Available to all registered QMUL staff and students as seen fit by Queen Mary University of				
London.				
Only to be used on the second majority of an amount of the	Autor comes			
Only to be used on the agreed project or a particular QN Name of Project:	npius course:	П		
Name of Froject.				
No edited versions or abridgements may be released without	out the written approval of the Presenter.	Yes	No	
If you wish to retain this right, tick the YES box.				
If you are happy to assign editing rights to QMUL (e.g. for basic functions highlights for promotional				
materials, editing to improve the quality of a recording, etc.)	I, tick the NO box.			
Video content can be live-streamed through the following channels (select as appropriate):				
 Online subscription channels (e.g. QMUL's You 	Tube channel)			
By email invitation				
Via QMplus				

Notes

Authorisation

 Creation of any DVD or sale of any product or licensing for any commercial distribution is subject to the Presenter's separate written approval.

If a Carer or Guardian

I give permission for the video/s to be used in future (based on the permissions granted above) by Queen Mary University of London publication/s and publicity materials	If the signatory is not the person pictured please complete the following details:		
Signed	Full Name (printed):		
Date	Relationship to subject:		
(for office use only)			
Original Purpose of Photo-shoot			
Job:			
Staff Contact(s):			
References			
Digital/Contact Print Number (if any):			
Completed By			
Name:			
(If an external videographer is hired)			
Name:			
Company:			
I understand the terms and conditions of the Queen Mary University of London release system and understand a fee will not be payable for any material that does not have completed forms where applicable.			
Videographer's Signature:			
Project Commissioned by:	Department:		