



CONSENT REQUEST FORM FOR USE OF YOUR RECORDINGS (Under the age of 16)

Your Name:

Your Age (if under 16):

Pearson requests your permission to take audio/video recordings and/or photographs of you and/or written transcripts of words spoken by you ("Recordings") for use in Pearson's marketing and promotional materials. By signing below you voluntarily agree to the following:

1. Pearson and/or its representatives have the exclusive right to create the Recordings and you hereby assign to Pearson all rights, title and interest in your contribution to the Recordings. You consent to Pearson using the Recordings for marketing and promotional purposes in any medium, including the internet, anywhere in the world. Under Data Protection laws you may withdraw your consent at any time (see paragraph 3 below).
2. Pearson ☐ may / ☐ may not use your name or any relevant information about you e.g. your name, age and school that you attend, in connection with the use of the Recordings. If Pearson does not use your real name, it will use a fictitious name instead, or no name at all. Pearson does not have to let you review, or approve, the Recordings or relevant information about you.
3. If you withdraw your consent to the Recordings and/or your name and details being used, we will remove your image and/or name and details as applicable from videos or photographs uploaded to YouTube or other social media and online marketing channels as quickly as we can. If your Recordings have been used in Pearson's promotional publications and you withdraw your consent to the Recordings and/or your name and details being used, we will not be able to remove what has already been printed, but we will remove the Recordings and/or your name and details at the next edition of the book/magazine/newsletter etc.

4. Here are some general terms:

- You agree that Pearson does not have to get permission from anyone else before Pearson can use the recordings or relevant information about you.
- You release Pearson and/or all of its representatives from any and all claims which you may have based on Pearson's use of the Recordings or relevant information about you.
- You waive any current or future claims based on moral rights in the Recordings.
- For questions please contact: btecawards@pearson.com

If you are between the age of 13 & 16 years of age, please sign and complete the information below. If under 13, please have a parent or legal guardian do so.

Learner Details & Signature

Centre or School address:	<input type="text"/>
Contact number:	<input type="text"/>
Signature:	<input type="text"/>
Date:	<input type="text"/>

Parent/Legal Guardian Details

Name:	<input type="text"/>
Contact number:	<input type="text"/>

If signed by the child aged between 13 & 16 years of age, the parent or legal guardian should countersign below

As the parent/legal guardian of my child named above, I have discussed this with my child and provide acknowledgement that they have given consent

Parent/Legal Guardian contact number:	<input type="text"/>
Parent/Legal Guardian signature:	<input type="text"/>
Date:	<input type="text"/>