

AUTHORISED PHOTOGRAPHERS

Event:	Dates:
--------	--------

I wish to take photographs or record images at this event. I agree to abide by the ETTA's guidelines and confirm that the photographs or recorded images will only be used appropriately.

Name (please print)	Address (please print)	Signature	Camera or Video

After the event this form should be sent the: The Child Protection Officer, English Table Tennis Association Ltd, Queensbury House, Hastings, East Sussex, TN34 1HF.