



Photograph Information Form



We would like to take
picture to

The service user is unable to give their consent but as their		
I have seen the photographs and I understand		
the reasons for them being taken and used.		
Name		
The purpose of using the photographs, and who might see them, was explained to the above carer/advocate by:		
Name:	Position:	
Signature:		Date:
This was witnessed by:		
Name:	Position:	
Signature:		Date:



This form will be kept in a file

The words will be put on a computer

