



**ACJ Orthotics Ltd Photograph/Video/Voice Recordings consent form**

All photographs, videos and voice recordings are stored and used in a manner that is compliant with the Data Protection Schedule.

I the undersigned hereby consent to Alice Irwin taking photographs/videos/voice recordings to enable completion of expert witness report and understand and consent to these being used and stored as per the data protection schedule.

Name of person: \_\_\_\_\_

Consent given by: (either person themselves or next of kin)

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_