## **GLASGOW GOLF UNION'S - USE OF CAMERA AND VIDEO EQUIPMENT**

This form must be completed by individuals seeking permission to use a camera or video equipment

Section A	To be Completed by the Applicant	
Name:		
Designation:		
Address:		
Venue/Event		
Date(s):		
Purpose:		
permission of for the purpos	the person(s) concerned. I understar	e altered in any way without prior writter id that I may only use the pictures/film(s) ne Glasgow Golf Union's Safe in Care
Signature:		
Date:		
Section B	For Official Use Only	
Application	APPROVED/REFUSED (delete as a	ppropriate)
Date:		
Signed:		
Print Name:		
Designation:		
Reason for Re	efusal:	

Now complete "Notification to Applicant Form", and keep a copy of this form

## **NOTIFICATION TO APPLICANT**

Your application has been ACCEPTED/REFUSED (delete as appropriate) for use as follows
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Name:	
Designation:	
Venue/Event:	
Date(s):	
Purpose:	
Official Signature:	
Designation	
Date:	

NOTE: Proof of identity and this letter of approval must be produced on request at the event or activity to which it relates.