

# (Filming Agreement form)

This agreement is dated ...../...../.....

## Teacher

I .....Teacher **OR** Principle of .....  
School Address: .....  
PO.Box : ..... Tel: .....

## Participant (Only for 18 years and above)

I ..... Hereby agree and acknowledge to film my Dances and shearing with Aspire International Dance Competition 2024,

## Parents

I .....hereby agree to the following:  
To allow my child .....  
To be filmed by ..... Studio/School, and sharing my child Personal data with Aspire Ballet Dubai.  
I agree that my child be included in video during this event which may be used for publicity purposes. I will notify my studio or Aspire Ballet Dubai in writing if I do not want my child's video used for AIDC publicity.

I have read this release of liability and I fully understand it's terms and sign by  
Me  
E-mail  
.....  
Tel: .....

..... Signed and on behalf of Teacher/Manger Name: .....	..... Signed and on behalf of Parents Name:.....	..... Signed and on behalf of Participant Name:.....
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