Private Party Video Consent Form

| Party/Event Name |
|---|
| |
| Date of Event |
| Location |
| |
| I hereby give my consent to be video recorded during the above private party/event. I understand that video footage may be used for purposes such as and that my likeness may appear in recordings or any resulting media. I acknowledge that participation is voluntary and that I have the right to withdraw my consent at any time prior to publication. |
| Full Name |
| |
| Email Address |
| |
| Signature |
| |
| Date |
| |