**Text

Description automatically generated with medium confidenceCarbon Literacy Content Consent Form**

Sharing your experience with Carbon Literacy helps to inspire other people and organisations to take part in Carbon Literacy training and pledge actions to reduce their emissions, thereby amplifying Carbon Literacy.

By completing this form, you give us permission to use and retain your content, including **words/quotes/text** and/or **photos/videos/logos**, for use in our communications. You can choose to opt out at any time by emailing [media@carbonliteracy.com](mailto:media@carbonliteracy.com).

|  |  |
| --- | --- |
| **Full name** |  |
| **Email address** |  |
| **Name of your organisation** |  |
| **Job title / Role in your organisation** |  |
| **Connection to Carbon Literacy** *(e.g. learner or trainer)* |  |
| **Name of organisation delivering Carbon Literacy** *(if applicable)* |  |
| **Details of the content you are giving permission to share** |  |

**I give permission for The Carbon Literacy Project to use and retain my content for use in:***Please tick or highlight as appropriate*

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| **Training materials**: Carbon Literacy training courses and Toolkit materials e.g. case studies of excellent pledged actions |  |
| **Social media:** The Carbon Literacy Project’s social media platforms (e.g., LinkedIn, Twitter, Instagram, Facebook, Vimeo) |  |
| **Website and email marketing:** TheCarbon Literacy Project’s website (including blogs), Carbon Literacy newsletters |  |
| **Press and traditional marketing:** Press releases, news articles, or any other marketing materials |  |

**Please state any other preferences below:** *e.g. I would like my name / organisation / role to remain anonymous*

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**Confirmation:**

I hereby give The Carbon Literacy Project permission to use and retain my content. The information I submit will only be used in connection with The Carbon Literacy Project and only for the purposes indicated above. My information will only be shared with third parties where necessary for processing or where we are required to do so by law.

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

*(Signature of parent, guardian or teacher,*

*if participant is under 18 years of age)*

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