Participant's Form

Exhibition Title: 'Faith, Hope and Love: LGBTQ+ Experiences'
Lead: David Robinson
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Website: www.davidrobinsonartist.com
Phone number: 07910 116646

Your reflection: please write/type into the box below

Your name / pseudonym to print alongside your reflection:	
Pronouns to display alongside your name / pseudonym:	

Your Consent

1. I have read and understood the information for participants
2. I agree to participate in the exhibition as described
3. I agree to the items checked below (please tick):
   - ☐ to submit a reflection for inclusion in a touring/online exhibition
   - ☐ to submit a photo of myself for inclusion in the touring/online exhibition (optional)
4. I acknowledge that:
   a. I understand that my participation is voluntary and that I am free to withdraw from the exhibition at any time and to withdraw any data supplied
   b. The exhibition may not be of direct benefit to me.

'I agree to the above as indicated and give my explicit consent under GDPR Article 6(1)(a) and Article 9(2)(a) for my personal data to be processed by David Robinson as indicated on this form, including any special category data I may choose to provide'

Participant:
Date:
Signature:

Please email your completed form and (optional) photo to me: contact@davidrobinsonartist.com, or call me to make other arrangements. Thank you! David Robinson