



**The Link Charitable Trust**  
**Data Sharing and Consent form - Adults**

<b>Name:</b>
<b>Address</b>

**I confirm that I have been given access to The Link CT Privacy statement**

**I understand that I may withdraw my consent and agreement at any time by writing to The Link CT.**

	Yes	No	N/A
I am able to make my own decisions and I give my consent to access The Link CT's services.			
I consent for The Link CT to share information where applicable with relevant organisations including the local authority, health services and our selected partners.			
I consent and agree for my details (name, address, contact information, medical information, assessments, notes and outcome information) to be held by The Link CT.			
I agree for relevant family members details to be held to be held by The Link CT.			
I agree for my email address to be used by The Link CT for purposes of communication and marketing			
I agree with the focus of work and conditions described during assessment			
I have been provided access to The Link Charitable Trusts Privacy Statement			
<b>Media</b>			
I give consent for the use of photographs of myself to be used for social media posts and The Link CT's website.			
I give consent for the use of photographs of myself to be used for publicity, reports and printed media.			
I give consent for the use of photographs of myself to be used for case studies to share with funders and commissioners.			
I give consent to display my artwork			
<b>Name</b>			
<b>Date</b>			
<b>Signed</b>			