



Surf Life Saving Queensland Photograph Consent Form

I/we, _____, consent to the use of the name/s and/or image of myself/my child/ren (*strike out as applicable*) for the scope of use as set out below.

Full Name/s of participant/s & date of birth:

.....

.....

.....

Address:

Suburb: **Postcode:**

Phone: (H) **(M)**

Surf Life Saving Club:

Event/activity participating in:

DECLARATION

I consent to Surf Life Saving Queensland (ABN 27 360 485 381) ("SLSQ") using my name, image and/or quote for any SLSQ internal and/or non-commercial external promotion, education or research purposes and that all proprietary rights including intellectual property rights of any image, photograph or likeness of me will be owned by SLSQ.

I agree that my name, image and/or quotes may be used in any medium including but not limited to provision of footage to the media.

I acknowledge that this permission does not extend to the inclusion of my name, image and/or quote in advertising or via paid endorsement without separate approval for this specific purpose.

If participant is over the age of 18 years:

Name:

Signed:

Participant

Date:/...../.....

If participant is under the age of 18 years:

Name:

Signed:

Parent/Guardian

Date:/...../.....