



PHOTO CONSENT FORM - CHILD



I, _____ (*Insert name*), of _____ (*Insert address*):

1. if applicable, declare that I am the parent/legal guardian of the following child or children (insert names or “not applicable”):

(collectively, “the Children”);

2. consent to The Queensland Country Women’s Association Country Kitchens’ Program (“the Organisation”) making images or recordings, whether sound, digital or otherwise, of me and the Children today (“Images and Recordings”);
3. acknowledge that the Images and Recordings may be provided by the Organisation to the State of Queensland, its employees, officers, agents and contractors (“the State”);
4. acknowledge that the State may:
 - (a) use, publish, copy, alter, amend, modify or reproduce the Images and Recordings in any form (in whole or in part) and by any medium, including but not limited to newspapers, magazines, brochures, television advertisements, promotional videos, websites or other multi-media;
 - (b) retain or store the Images and Recordings in hard copy or digitally;
5. agree to the Organisation and the State collecting, storing, handling, accessing, managing, transferring, using or disclosing personal information about me and the Children, including but not limited to our name, details and image, in connection with the Images and Recordings;
6. agree that the rights granted in this Photo Consent Form are perpetual and that I will not receive any payment, royalty or other consideration (whether monetary or otherwise) in connection with the making, use or storage of the Images and Recordings; and
7. acknowledge that I am signing this Photo Consent Form of my own free will, on the full understanding and comprehension of the terms of this Photo Consent Form.

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Signed

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Date

