

1 I GIVE CONSENT

On behalf of the individual identified overleaf (the **Individual**), the person or persons signing this Consent Form (the **Signatory**)* grants consent to the Department of Education and the Arts and to any Department or Agency of the State of Queensland (the **Department** and the **State**) to use and retain the Individual's:

- name, image and sound or other recording; and
- copyright material (**individual work**).

****Note:** If the Individual is under 18 years of age, the Signatory must be a parent or guardian of the Individual. If the Individual is 18 or older, the Signatory and the Individual will be the same person.*

2 FOR THE PURPOSE OF

This consent applies to any use of the Individual's name, recording or image, and individual work, in connection with the Department or the State, including for the following purposes:

- assessment of students and other purposes associated with the provision of education;
- public relations, promotion, advertising, media and commercial activities;
- use by the media in relation to activities that show the Individual in a positive light, eg. drama and musical performances, sports and prize giving; and
- any other activities, if any, identified in further schedules attached to this Consent Form.

3 FOR THE DURATION OF

This consent will continue until:

- where the Individual is under 18 years of age, when the Individual turns 18; and
- In any other case, when the Individual revokes consent (by writing to the Principal of the school, and in the case of employees, writing to the District Office),

and where more than one of these events may apply, whichever occurs first.

Despite the above, if, at the time such an event occurs, the Department or the State is using the Individual's name, recordings or images or any Individual work, or the State has entered into contractual obligations in relation to that material, the consent will continue in relation to that material until the Department or the State's use is complete or after the contractual obligations come to an end.

4 I UNDERSTAND THAT

- **'Use'** includes:
 - to create, make copies of, reproduce or retain in any form, including by camera, video, digital recorder, webcam, closed circuit television, mobile phone or any other device; and
 - to distribute, publish or communicate in any form, including via newsletters and other print media, television and the Internet,in whole or in part, and to permit other persons to do so.
- The Department or the State will not pay the Signatory, or the Individual, for my giving this consent or for the use of the Individual's name, recording or image, or Individual work.
- This Consent Form revokes and replaces all previous consent forms.
- Nothing in this Consent Form limits the rights that the Department or the State have in relation to the use of my name, recording or image, copyright or other intellectual property under any other law.

5 LIMITATIONS ON CONSENT

The Individual or Signatory wishes to limit the permission in the following way:

6 DETAILS**Name of Individual****Address of Individual****Name of school** (at which the Individual is enrolled, employed or works as a volunteer)

ACACIA RIDGE STATE SCHOOL

Signature of the Individual**Date**

/ /

Signature of the parent or guardian (if the Individual is under 18 years)**Date**

/ /

Name of signing parent or guardian**Address of signing parent or guardian****7 NOTE**

The Department will use its best endeavours to ensure the person signing this Consent Form is authorised to do so, but takes no responsibility for circumstances in which it is misled as to the identity or authority or ability of a person to provide consent.

If you require a copy of this signed Consent Form, or if you wish to revoke this consent, please contact the Principal of the school at which the Individual is enrolled or works.