

MEDIA CONSENT AND RELEASE FORM

Location: _____ Date: _____

Participant Information:

Full Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Consent Grant:

I hereby grant permission to [Organization/Company Name], its affiliates, employees, agents, and assigns (collectively, "the Company"), to record, photograph, film, and/or videotape my image, voice, and/or statements ("Media") for use in promotional, educational, advertising, or other lawful purposes. I understand that the Media may be used in various media formats including print, digital, and social media platforms.

Rights and Usage:

I acknowledge and agree that the Company shall own all rights, title, and interest in and to the Media, including copyrights and other intellectual property rights. I waive any right to inspect or approve the finished product or the specific use to which the Media may be applied.

Compensation:

I agree that I shall receive no compensation, payment, or royalties for the use of the Media now or in the future.

Release and Waiver:

I hereby release, discharge, and hold harmless the Company and its representatives from any claims, demands, or causes of action that I may have now or in the future arising out of or in connection with the use of the Media, including but not limited to claims for defamation, invasion of privacy, or infringement of any right of publicity or moral rights.

Confidentiality and Privacy:

The Company agrees to handle any personal information obtained in accordance with applicable Australian privacy laws, including the Privacy Act 1988 (Cth) and the Australian Privacy Principles. Personal information will only be used for the purposes described herein and will not be disclosed to unauthorized parties.

Governing Law and Jurisdiction:

This Media Consent and Release Form shall be governed by and construed in accordance with the laws of Australia. Any disputes arising under or in connection with this Form shall be subject to the exclusive jurisdiction of the courts of Australia.

Acknowledgment:

I have read and understood this Media Consent and Release Form and agree to be bound by its terms. I represent that I am at least 18 years of age or have obtained the consent of a parent or legal guardian if under 18.

PARTICIPANT'S SIGNATURE

WITNESS'S SIGNATURE

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

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