

# PHOTOGRAPHY CONSENT AND RELEASE FORM

Location: \_\_\_\_\_ Signature Date: \_\_\_\_\_

## Participant Information:

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Consent and Release:

I, the undersigned Participant, hereby grant permission to the Photographer, their representatives, employees, and agents (collectively, the "Photographer"), to take and use photographs, video recordings, and/or digital images of me, my property, and/or my likeness (the "Images") for lawful purposes, including, but not limited to, marketing, promotion, advertising, editorial, and educational uses in any media, worldwide, in perpetuity. I understand and agree that the Images may be edited, copied, exhibited, published, distributed, and/or used for any lawful purpose. I waive any right to inspect or approve the finished product or the use to which it may be applied.

## Rights and Ownership:

I acknowledge that the Photographer owns all rights, title, and interest in the Images, including copyrights. I waive any rights to royalties or other compensation arising from or related to the use of the Images. I release, discharge, and agree to hold harmless the Photographer from any claims, demands, or causes of action that I may have by reason of this authorization or use of the Images.

## Privacy and Confidentiality:

The Photographer agrees to handle personal information provided in accordance with the Australian Privacy Principles under the Privacy Act 1988 (Cth). Personal information will only be used for the purposes described in this Agreement and will not be disclosed to third parties except as required by law or with consent.

## Acknowledgment and Understanding:

I represent and warrant that I am at least 18 years of age and have the full legal capacity to execute this Consent and Release. If the Participant is under 18 years old, a parent or legal guardian must sign below. I have read this Consent and Release before signing and fully understand its contents, meaning, and impact.

## Parent/Guardian Consent (if applicable):

I certify that I am the parent or legal guardian of the Participant named above, have the legal authority to execute this Consent and Release on behalf of the Participant, and do hereby give my consent without reservation.

**PARTICIPANT'S SIGNATURE**

**PARENT/GUARDIAN SIGNATURE (if applicable)**

Printed Name: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

This Consent and Release is governed by and construed in accordance with the laws of Australia. By signing, the Participant (and Parent/Guardian if applicable) acknowledge that they have read this Consent thoroughly, understand its contents, and agree to be bound by its terms.

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