

Consent form

Release for use of images or recordings

1. Consent

I give consent to the State of Queensland acting through the Department of the Premier and Cabinet (the Department) to make, use and/or retain an image or recording as detailed below that may identify me, ~~my child or an individual for whom I have authorised substituted decision making responsibility~~ (*strike through whichever does not apply*).

I allow/~~do not allow~~ my name/~~my child's name/the person's name for whom I have authorised substituted decision making responsibility~~ to be used in association with the use of images or recordings (*strike through whichever does not apply*).

I understand that I can withdraw or modify my consent at any time in writing to

Suzanne Little, Principal Workforce Planning Officer, Office of Rural Health,
PO Box 1006, ROMA QLD 4455. Telephone 1800 680 291,
facsimile (07) 4624 2888, email QHRSS@health.qld.gov.au

My consent is subject to the following limitations (*more than one answer is possible*):

- none
- cultural considerations, *please specify*:
 - use restricted to one Department (otherwise the image or recording may be provided to another Queensland Government Department for use in promoting Queensland Government activities)
- usage restrictions, one type of publication etc, *please specify*:
 - expiry of consent, *please specify*.
 - Other restrictions/conditions, *please specify*.

3. Undertakings

Subject to any conditions/limitations in Clause 2, I understand that by giving consent, the Department can use the image or recording to promote Departmental or Queensland government activities. The Department may reproduce the image or recording in any form, in whole or in part, and distribute the works by any medium including the Internet, CD-ROM or other multimedia.

I understand that the Department:

- will not pay me for giving this consent or for the use of my image or recording;
- may keep the image or recording on record until I revoke my consent;
- will return or destroy images or recordings if I withdraw this consent, with the exception of those already published;
- may use the image or recording in the future, unless I specify limitations for its use; and
- will not infringe the rights of any third party by exercising its rights given in this consent.

4. Description of image or recording

Please specify in as much detail as possible:

5. Participant details

For the purposes of this consent form, the person whose image or recording is used is known as “the Participant”.

Full name of Participant:

Date of birth:

Telephone:

Email:

Address:

Full name of guardian (if consenting for a minor or a person with a decision-making disability):

Address of guardian:

Signature: _____ Date:

Note: The Department will use its best endeavours to identify the person signing this consent form and takes no responsibility for circumstances in which it is misled as to the identity or authority of a person to provide consent.

OFFICE USE ONLY

Witness (must be a Queensland Government employee) I have verbally explained this information to (name of participant) in relation to (description of image or recording) and witnessed the signing of this consent form.

Full name:

Position:

Department:

Details of identification sighted – (e.g. driver’s licence, student card..)

Signature:

Date:

Important note:

Important information explaining this consent is located on the reverse side of this consent form. You may request a copy of this information at any time.

IMPORTANT PRIVACY INFORMATION:

The Department is collecting the information contained in this form to verify your consent for use of your image or recording for the purposes contained in the consent form. Your consent to the use of your personal information is required in accordance with the Queensland Government’s Information Privacy Standard 42. The information privacy principles contained within this Standard govern the collection, use, storage, security, and disclosure of personal information.

Only authorised Departmental officers have access to this information. From time to time the Department may provide some or all of this material to other government departments and agencies, or to recognised media outlets for their use to promote Departmental programs, services and initiatives as outlined above. Your personal information contained in this form will not be disclosed to any other third party without your consent, unless authorised or required by law.

If you have any queries about any privacy issues that relate to this consent form then please contact the Department’s privacy contact officer.

The Participant must be given a copy of the signed consent form and explanatory notes.

EXPLANATORY NOTES

What is this consent for?

This consent form authorises the Department to use the specified image or recording of the participant, together with information about their participation in Departmental initiatives, in publications, productions and presentations in connection with the Department's work. The consent extends to use of the image or recording in whole or part and digital adaptations used alone or in conjunction with words, drawings and other images.

What sort of publications could this material appear in?

This material can appear in television advertising, videos, brochures, forms, public relations displays, annual reports, press advertising, internal documents such as manuals, web sites, certificates, strategic plan, posters and promotional material and other materials produced by the Department. The images and recordings may also be used by other government departments and agencies for similar purposes (if authorised).

What is an image or recording?

An image or recording referred to in this consent form includes photographs, videos, films, or sound recordings of the Participant.

Who is a child?

A child is defined as any person who has not yet turned 18 years of age.

Who is a person with a decision-making disability?

For the purposes of this consent form, a person with a decision making disability is a person who cannot give consent because they lack capacity or have an intellectual or other impairment that affects their capacity to consent. If a person is an adult and unable to give consent, an authorised decision-maker must give consent on the person's behalf (see for example *Powers of Attorney Act 1998* and/or the *Guardianship and Administration Act 2000*).

What happens to the consent form once it is filled out?

The consent form is retained by the Department and will be placed on file. A copy will be provided to the Participant.

Modification or Withdrawal of consent

Consent can be modified or withdrawn in writing at any time however, any changes will only apply from the date of receipt by the Department. Any existing material in which the image or recording is used will not be withdrawn from use.

Produced by Public Affairs, Queensland Health

© State of Queensland, Queensland Health, 2004