**Media Consent Form**

The Debutante Ball is about growth, aspirations and celebrating a milestone. The purpose of this form is to ensure you are able to create positive experiences and memories whilst you participate in the Debutante Ball. There will be a number of exciting opportunities for professional photos/ videos to be taken during the dance practice and on the night of the event and we want to ensure this is done in a safe and respectful environment. You will also be provided with copies of your professional photos and a video from this event to make sure you remember this celebration for years to come.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (participant’s name) agree to the following as the conditions of my participation in the Centre For Excellence in Child and Family Welfare’s promotional, marketing and fundraising activities.

I understand that:

1. I agree for the Centre For Excellence in Child and Family Welfare to have complete ownership of all media coverage and I do not have the right to receive any payments, royalties or other compensation for this appearance.
2. I hereby assign all legal rights and interest, including copyright, in all materials provided to the Centre For Excellence in Child and Family Welfare.
3. I agree that the Centre For Excellence in Child and Family Welfare’s media crew may photograph, film and/or record my voice for the purpose of this event; whether by film, videotape, magnetic tape, digitally or otherwise. And that multiple copies of the photographs and recordings may be made.
4. I agree that the Centre For Excellence in Child and Family Welfare may use my image for the purpose of publicity for the Centre For Excellence in Child and Family Welfare and associates.
5. I agree that my permission is not time limited.
6. I consent that my views, opinions and quotes may be used in publications, with respecting the privacy of my name. I agree that the materials may be used without identifying me personally, or as the author of the work.
7. I understand that the Centre For Excellence in Child and Family Welfare may only use my full name and/or images in connection with any of the materials provided if I am over the age of 18 years or when I turn 18 years and have given my express permission.
8. I understand that I can only give permission for the above if I am over the age of 18 years and will seek the permission of the legal guardian/carer if I am under the age of 18 years.

Please tick- All participants to tick:

* I will respect and be aware that other young people can be identified in the images and agree to not make copies of the Photographic material and only show people that I trust.
* I understand that publication of any photos or identifying information about young people may breach the Children, Youth and Families Act.

Signature of child / young person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

If you are under 18 years of age permission has to be gained from your legal guardian and / or carer.

Full name of legal guardian/carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of legal guardian/carer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

If you have any questions please contact

Erin Moloney at the Centre of Excellence on

9614 1577 or email: Erin@cfecfw.asn.au