# 2017 PHOTOGRAPHY / VIDEO PERMISSION FORM

# At certain times throughout the year, our students may have the opportunity to be photographed or filmed for our College publications, including the newsletter, website and social media, or to promote the College in newspapers and other media. Maronite College of the Holy Family may also wish to use student photographs/videos in print and online promotional marketing, media and educational materials. Please complete the permission form below. Please return this note by Monday 13th February 2017.

I give permission for my child’s photograph/video and name to be published in the:

* College newsletter
* College website
* College intranet
* College facebook
* College promotional materials
* Newspapers and other media.

I authorise Maronite College of the Holy Family to use the photograph/video in material available free of charge to schools and education departments around Australia for promotional, marketing, media and educational purposes.

I give permission for a photograph/video of my child to be used by Maronite College of the Holy Family in the agreed publications without acknowledgment, remuneration or compensation.

I understand and agree that if I do not wish to consent to my child's photograph/video appearing in any or all of the publications above, it is my responsibility to notify the College. Failure to sign and return this note to admin will be taken as an indication that you agree that your child’s photo can be used.

Licensed under NEALS: The photograph/video may appear in material which will be available to schools and education departments around Australia under the National Educational Access Licence for Schools (NEALS), which is a licence between education departments of the various states and territories, allowing schools to use licensed material wholly and freely for educational purposes.

# I, name of Parent/Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ give consent/do not give consent (please circle)

# Parent/Guardian signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year Level: \_\_\_\_\_\_

Student aged 15+ must also sign.

Student’s signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Any personal information will be stored, used and disclosed in accordance with the requirements of the Privacy Act 1988 (Cth).

# Sr Margaret Ghosn

Principal