



Quadriders Association of South Australia Inc.

Filming/Photographic Consent Form

Event: All QuadridersSA

Date of filming/photography: During operation of QuadridersSA Events

Name of individual/Family to be photographed/filmed:

I/We as named above, consent to Quadriders Association of South Australia and its agents (including without limitation, any photographer, interviewer, creative agency or media organisation) recording images of me at the Event identified above, for promotional purposes.

I consent to these images being used and disclosed to any person or organisation approved by Quadriders Association of South Australia, including without limitation, by publishing them as part of a book, poster, brochure or report, newspaper advertisement or article, television advertisement or program, radio advertisement or program and including on the world wide web or any other media.

I also consent to any images taken by Quadriders Association of South Australia Inc. being deposited with MSA or MA a selection of images from the Event will be added to the Image Library.

I agree that QuadridersSA and its agents may edit the images prior to publication, as they consider appropriate, without first consulting me.

Note: if you are under 18 years of age your parent/legal guardian must also indicate their consent by signing in the space below.

Parent/Guardian's Consent:

I consent to the above on behalf of the child named in this form.

Signed: _____ Date: _____

Print name: _____

Phone: _____

Email: _____

Privacy Statement: The personal information submitted on this form is collected by Quadriders Association of South Australia for the purpose of obtaining your consent to the use, disclosure and publication of your image. The information will not be disclosed to other parties except where permitted under the *Privacy Act 1988*.