**Privacy Collection Notice, Consent and Release Form**

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| --- | --- |
| **Branch:** |  |
| **Event:**  |  |
| **Location:** |  |
| **Date:**  |  |

The Department of Premier and Cabinet (including its representatives, employees and agents) (**DPC**) will be collecting and using personal information in connection with the event described above, for the purposes detailed below, from:

|  |  |
| --- | --- |
| **Name:**  |  |
| **Phone:** |  |
| **Email:** |  |

**Images**

Subject to the consents below, I grant DPC the right to take images, including photographs and video, of me in connection with the event described above, without payment or other consideration. I authoriseDPC to use, reproduce and publish the same in any format and agree that DPC may use such images of me for any lawful purpose, including, for example, publicity, illustration, advertising and web content, including social media.

**Personal story, comments, feedback**

Subject to the consents below, I grant DPC permission to record, use, reproduce, edit, copy, exhibit, publish and distribute all or part of my personal story, comments or feedback and/or their likeness for any lawful purpose and in any and all of its publications, including web site entries, without payment or other consideration.

**Consents: please only tick the boxes that apply to your circumstances**

**Name on image: please choose 1 only**

🞏 I consent to my name being used with my images

🞏I request my name be withheld from my images

**Image use: please choose 1 only**

🞏 I consent to my image being used only for the purpose of ……………………………………………………………..

🞏I consent to my image being used on Victorian Government websites and social media

**Story use: please only tick those that apply**

🞏 I consent to my name being used with my story, comments or feedback

🞏I request my story be de-identified to protect my identity and that of anyone I refer to

🞏 I consent to my story being used only for the purpose of………………………………………………………………..

**Acknowledgements and release**

I agree that I am solely responsible and liable for the content I share in connection with the event. I have shared my image, personal story, comments or feedback (as applicable) voluntarily and I acknowledge and agree that they, and/or their likeness, will become the property of DPC until I notify DPC that I withdraw my consent.

I acknowledge that DPC may decide not to use my image, personal story, comments or feedback at all, and agree that this decision is at the sole discretion of DPC.

I acknowledge and agree that any and all intellectual property rights in any material produced by DPC, including but not limited to copyright and rights in any photographs or films that I appear, or stories, comments or feedback that I have shared with DPC, belong to DPC.

I acknowledge and agree that the information collected from me in connection with the event may be used and reproduced for the purposes stated in this notice without further notice, acknowledgment, remuneration or compensation to me.

I also acknowledge that:

* DPC will endeavour to ensure that any personal information held is up to date and accurate.
* I can access or correct my personal information by contacting DPC directly.
* I can withdraw the authorisations provided in this form at any time but that withdrawal of authorisation will not apply in relation to any prior use of the information.
* Personal information collected by DPC is treated in the strictest confidence. DPC is subject to requirements regarding the collection, use, disclosure and granting of access to personal information, which are set out in the *Privacy and Data Protection Act 2014* (Vic). Personal information collected by DPC will be handled in accordance with this form and its Information Privacy Policy located at <http://dpc.vic.gov.au/index.php/privacy>. DPC is subject to laws relating to freedom of information requests and public records obligations, which may apply to documents and information provided by me.

I hereby release DPC and the State of Victoria from any and all claims, including defamation, invasion of privacy, infringement of moral rights, or intellectual property rights that may arise by reason of this authorisation.

By signing this release form, I , \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, acknowledge that I have read, and understand and agree to the above terms, and that I am over 18 years of age:

|  |  |
| --- | --- |
| **Signature:**  |  |
| **Date:** |  |

If you are under 18 years of age, please ensure your adult parent or guardian signs this form.

Signature, adult or parent/guardian: