**AHN Content Release Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ authorise Australian Homestay Network (AHN) the irrevocable right to take, edit, alter, copy, exhibit, publish, distribute and make use of any and all pictures or video taken of me and the people in the photo/video I have provided, to be for the purposed of advertising, including, but not limited to, newsletters, flyers, posters, brochures, advertisements, press kits and submissions to journalists, websites, social networking sites and other print and digital communications, without payment or any other consideration.

This authorisation extends to all languages, media, formats and markets now known or later discovered. I waive the right to inspect or approve any finished product in which my likeness appears, including written or electronic copy. I waive any interest that I may have in the copyright to My Image now or at any future time and acknowledge that I am not entitled, nor shall in the future be entitled, to receive any payment or consideration in respect of it and agree to make no claim against Australian Homestay Network for any payments for the Publication of My Image. I understand and agree that these materials shall become the property of Australian Homestay Network and will not be returned.

I hereby release Australian Homestay Network from all liability and causes of action which I, my heirs, representative, executors, administrators, or any other persons may make while acting on my behalf or on behalf of my estate.

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Telephone:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Note: If any photo/video contains anyone under 18 years of age, a parent or guardian must fill in this section.

The information will be used by AHN for the purpose of verifying that proper consent has been provided in accordance with the Information Privacy Act 2009.

**Name of Minor 1:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Age of Minor**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Identifier (red top, blue hat:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Name of Minor 2:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Age of Minor**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Identifier (red top, blue hat:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_