## Photo and Video Footage Release Form

www.ses.nsw.gov.au

between NSW State Emergency Service and	u	
Name:		
Email Address:		
Date:		
I hereby grant the NSW State Emergency Somy image or images of my child or children		
Please tick:		
$\square$ All of the following, or $\square$ only those o	f the following ticked:	
$\square$ The official NSW State Emergency Servi	ice website	
☐ Public displays		
☐ Public broadcast via electronic media		
☐ Promotional material		
☐ The NSW SES Annual Report		
$\square$ Any printed publication produced by the	e organisation	
□ With an SES media release		
I hereby release and discharge the NSW Sta assignees from all claims and demands ari including all claims for invasion of privacy,	ising out of, or in connect	ion with the use of the photographs,
I understand that the NSW State Emergency use my image in a way that is deemed delib		•
I represent that I am over the age of eightee understand its contents. This release shall	•	
Photo subject or parent or guardian of photo su	ıbject: NSW State	Emergency Service representative
Signed Dated	Signed	Dated





