



## **PUBLICITY RELEASE FORM**

The photograph(s)/video/audio taken will be used for a range of purposes, but principally for use in materials produced by Down Syndrome NSW, to further the purpose of people with Down syndrome. This may include, but is not limited to, newsletters, brochures, leaflets, websites and other electronic media, including social media sites.

The content may also be stored in the Down Syndrome NSW digital library.

By reading and signing the agreement below, you are acknowledging the intended uses (above) and giving your permission for the photograph(s)/video/audio of yourself to be used by Down Syndrome NSW.

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I, \_\_\_\_\_, agree for myself to be photographed/video/audio on behalf of Down Syndrome NSW. I understand that the content taken may be used by the Organisation for purposes such as those outlined above.

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

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

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