

PHOTOGRAPH RELEASE (FOR USE BY ECU STUDENT)

NAME OF THE PHOTOGRAPHED PERSON			("the Subject")
ADDRESS OF SUBJECT			
NAME OF THE STUDENT			("the Student")
LOCATION			("the Location")
PURPOSE	Please tick the applicable box: ☐ for any purpose whatsoever ☐ for inclusion in the Student's assessable work or research material		
	(including published rese ☐ other (please specify	,	
			("the Purpose")
, the Subject, hereby consent to and authorise Edith Cowan University ("ECU") and / or the Student and persons authorised through them to photograph me at the Location and to reproduce, publish and communicate the photographs in any medium for the Purpose. Unless otherwise agreed in writing the preceding rights granted to ECU and the Student shall be perpetual, royalty free and worldwide.			
acknowledge that the negatives and / or any other storage device or medium in which the mage is held and all rights in the photographs, including copyright, will remain the property of the Student.			
SIGNED			
on this day of		, 20	
Where the Subject is under the age of 18 at the date of signing the Subject's legal guardian must sign on their behalf and if the Subject may be considered capable of understanding the implications of consenting to this release then both the legal guardian and Subject should sign)			
SIGNATURE OF SUBJECT / LEGAL GUARDIAN OF SUBJECT		NAME OF SUBJECT / LEGAL GUARDIAN OF SUBJECT	