



**Photographic Image/Voice Release Consent Form  
Adult / Minor**

Consent is required whenever your photographic image and/or voice recording is used in QHS communications (such as on the QHS website, social media site, or in our newsletter).

Please use one form for each client and retain a copy of this form in the secured Consent master file.

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

Location / Event: \_\_\_\_\_  
\_\_\_\_\_

**Any questions about the photographing and/or audiotaping should be directed to the Event Coordinator:**

Colleen Lessmann  
Name (please print)

(250) 314 6732  
Phone number

I, (please print) \_\_\_\_\_ grant permission to Q'wemtsin Health Society to use my photographic image and/or voice recording or that of my child under eighteen (18) years (or a child of whom I am legal guardian) without restriction, in any form. I release any ownership of this image and/or voice recording and it becomes the property of Q'wemtsin Health Society.

I fully understand that Q'wemtsin Health Society may use this image and/or voice recording in all forms of media (including, without limitation videos, printed material, public display, publish in book form and electronic reproduction and dissemination).

I further understand that any photographic images and/or voice recordings is being collected pursuant to section 26 of the Freedom of Information and Protection of Privacy Act, R.S.B.C. 1996, c. 165. I further understand that my or that of my child(ren) under 18 years, image and/or voice recording may be stored, accessed or disclosed outside of Canada.

Name of Individual **18 years old or older** (please print):

\_\_\_\_\_  
\_\_\_\_\_

Signature of Individual

If applicable, name(s) of child(ren) **under 18** (please print):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of parent or guardian if child(ren) under 18 years