

# Media Release Authority

I hereby authorise RSPCA NSW (Royal Society for the Prevention of Cruelty to Animals New South Wales) and those acting pursuant to its authority to:

- a. Record my participation and image on film, photograph, audio, electronically or any other similar medium.
- b. Use my name, likeness, and or biographical material in connection with these or other recordings.
- c. Exhibit in private or in public, such recordings in whole or in part without restrictions or limitation for any educational or promotional purpose which RSPCA NSW, and those acting pursuant to its authority, deem appropriate.

I hereby absolutely and irrevocably and forever discharge, and agree to preclude RSPCA NSW and all persons acting under their permission and authority including the producer from any claims, liability or injury that may occur while performing or appearing in such video, audio, photographic or any similar media which but for the execution of this deed I may have had against RSPCA NSW.

I understand I will not receive any payment or compensation for my participation, and in consideration of the above promotional materials and in consideration for this release.

I understand that by participating in this project that I am supporting RSPCA NSW in their mission to prevent cruelty to animals by actively promoting their care and protection.

Trademarking/watermarking is unfortunately not possible in order to retain the integrity of RSPCA's website and digital outlet. The media work and content developed by volunteers will not be watermarked.

I understand the above conditions will come in effect immediately from the date of signing this release.

Name	Date of birth*
Address	
Phone	Mobile
Email	
Signature	Date

\*If you are under 18 years of age at the date of signing this release, you will require parental consent or the consent of legal guardian below.

In my capacity as the parent and/or legal guardian of the applicant/performer, I hereby consent to the above terms of the deed of release on behalf of the applicant/performer.

Name of Parent/Guardian	
Address	
Phone	Mobile
Email	
Signature of Parent/Guardian	Date

**Return this form to:**

RSPCA NSW Communications Department  
PO Box 34, Yagoona NSW 2199  
[comms@rspcansw.org.au](mailto:comms@rspcansw.org.au)

