



CONSENT FORM: OFFICIALS (ADULT) PHOTOS/IMAGES/VIDEOS

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I, (Full Name) consent to DSAC and DBE to display photos/images/videos indicated below as part of:

- a demonstration/project/activity in the course of school sport activities.
- the DSAC, DBE and invited media webpages and social media platforms (including Facebook, Twitter, WhatsApp and TikTok).
- samples given to programme publishers, or contest entries submitted to sponsors.
- video recordings to appear in a DSAC and DBE-related programme broadcast on a television station; and/or
- any printed publication, including, though not limited to, newspapers, magazines, booklets, etc.

In granting this permission, I understand that the DSAC and DBE may use my photos/images/videos purposes such as celebrating achievements and publicizing School Sport events, as deemed appropriate by DSAC and DBE, and that suchuse may include a display in the DSAC and DBE photo gallery.

SECTION B:

DSAC and DBE confirm that it shall only use my photographic images in line with itscode of practice and POPIA policy manual and to demonstrate or promote activities relating to school sports. DSAC and DBE also will hold and strictly control the final posting/publication andcopyright of all photos/images/videos/ that it posts or uses as indicated in this consent form.

SECTION C:

Please tick the relevant boxes ar for photographic images of your	nd sign below in all instances where you do not give your consent child being used.
Use of image in DSAC	and DBE materials and postedarticles.
On display boards and p	osters of DSAC and DBE.
In media coverage of the	e departmental sporting achievements, team, event photos etc.

Please note that you are signing this consent form in the knowledge that any photos/images/videos posted on the DSAC and DBE website can be downloaded and reproduced by various news organisations, including print, electronic and broadcast media, andyou, therefore, release DSAC and DBE from any liability arising from the use of photos/images/videos in DSAC and DBE web postings.

Additionally, you hereby confirm, acknowledged, and understand that there are potential dangers associated with the posting of photos images and videos on a website and any social media platform since global access to the internet does not allow for control over who accesses information.

SECTION D:

I confirm that I give consent regarding my image being used by the DSAC and DBE and that no royalty, fee, or other compensation shall become payable to me because of such use.

I further understand and acknowledge that if I wish to rescind this agreement, I may do so at any time by sending a letter to DSAC and DBE.

I understand and acknowledge that I may revoke this agreement at any time by notifying the DSAC and DBE in writing. The revocation will not affect any actions taken before the receipt of this writtenconsent and release. Images will be stored in a secure location and only authorized staff will have access to them. The said images/videos/photographs will be kept if they are relevant and after that time destroyed or archived.

NAME OF OFFICIAL	
PHYSIAL ADDRESS	
TOWN/CITY	
POSTAL CODE	
CELLPHONE NUMBER	
EMAIL ADDRESS	
SIGNATURE	
DATE	

^{*}Officials 18 years of age or older sign this form themselves.