

## Photo and Information Consent Form

| I,   | (name)  |
|--|---|
| Give permission for my photograph and/or informathe purposes of corporate promotion, communication | mation to be used by the Loddon Shire Council, for cation or publication with the public. |
| I understand that these details in which I appear Council publications.                            | r may be used by Council on the internet or in  |
| Print Name:  |   |
|  |   |
|  | Postcode:   |
| Contact Number:  |   |
| Signature:   | Date:   |
| If the person is aged under 18 years of age, consent   | t from a parent or guardian is required.  |
| Parent/Guardian's Name:  |   |
| Address:   | Postcode:   |
| Contact Number:  |   |
| Date: Parent/Guardian's Signature  | );  |

## Please return completed forms to:

Loddon Shire Council 41 High Street, Wedderburn, Victoria PO Box 21, Wedderburn, Vic 3518 Telephone: (03) 5494 1200

Facsimile: (03) 5494 3003 Email: loddon@loddon.vic.gov.au Web: www.loddon.vic.gov.au

## **Privacy statement**

Personal information collected by Council is held securely and used in accordance with the Privacy and Data Protection Act 2014. Council may disclose this information to other organisations if required or permitted by legislation. Should you wish to access or modify this information, please contact Council.