Video Competition Registration and Consent Form
Full Name of Entrant: $\qquad$
Date of Birth:

## Suburb of Residence:

$\qquad$

## Email Address:

$\qquad$
Video File Name:

## The Video competition aims to:

- Promote effective mental health strategies on the LMSPN website and socials, including but not limited to Facebook, Instagram, You Tube and Tik Tok.


## ACKNOWLEDGEMENT and Parent/Carer consent of entrants ages 12 - 15 years

In signing below, you acknowledge that:

- You have read or have had explained to you the Terms and Conditions
- Personal information (such as images and recordings of your child) contains (or may contain) their personal information, and you give permission for LMSPN to use this personal information for promoting positive mental health self-care as outlined above.
- LMSPN may negotiate changes to parts of videos submitted, if there are concerns about harmful content.
- LMSPN cannot recall publications or products once released; personal material and personal information published on the internet becomes a permanent record, even if a post or a web page containing personal information is deleted at your request.
- LMSPN will handle your child's personal information in accordance with the Privacy Act 1988 (Cth), and any other applicable laws.


## Consent for Entrants aged 12-15

Parents Full Name: $\qquad$
I, (name) $\qquad$ of (address) $\qquad$
Telephone $\qquad$ Email

Give permission for LMSPN to use my child's personal material for the purposes stated above: YESNo

I give permission for LMSPN to use/publish my child's:

| First Name | YES $\square$ |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| No |  |$\quad$ Last name $\quad$ YES $\square$ No $\square \quad$ Age $\quad$ YES $\square$ No $\square$

- I will notify LMSPN as soon as possible if I want to withdraw my consent. YESNo

Signed (Parent/carer ) : $\qquad$

Signed (entrants over 16years) $\qquad$

This Registration and Consent Form must be uploaded along with the Entrants Video Submission.

