



## Project Rozana Consent Form - Adult

Name: \_\_\_\_\_

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

Location: \_\_\_\_\_

I give my consent for the images/footage, interviews and personal data collected to be used by Project Rozana and \_\_\_\_\_ (photographer /filmmaker).

I understand the following:

1. The material will be stored and transferred securely by Project Rozana and could be used on printed materials (including fundraising appeals, publications and annual reports) and online including in social media or the Project Rozana website.
2. The material could be used by Project Rozana's partners in advocacy, fundraising, campaigning and program work.
3. The material could be used in the press, such as in newspapers both printed and online
4. The material could be used by Project Rozana offices around the world.

Project Rozana is committed to upholding the rights of data subjects under data protection legislation. Project Rozana will abide by the ethical image policy and ensure that all material is used accurately and honestly. The material will not be used out of context. The material will only be used by organisations or individuals that are working with Project Rozana and support its aims.

I understand that I can withdraw my consent at any time by contacting the local Project Rozana office or one of their partners.

Signed: \_\_\_\_\_

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

For more information see our Privacy Policy or ask a member of Project Rozana staff for a copy.