

Consent to Audio Record, Videotape, and Photograph (for City Volunteers)

City of Mississauga
Recreation Division
950 Burnhamthorpe Road
Mississauga ON L5C 3B4
www.mississauga.ca



Personal information on this form is collected under the authority of Section 11 of the *Municipal Act, 2001*. It will be used by the City of Mississauga to administer volunteer consent for photography, video and/or audio recordings. Questions about the collection of this personal information should be directed to: Training Coordinator, Training and Volunteer Program, Community Services Department, 950 Burnhamthorpe Road, Mississauga, ON L5C 3B4, Telephone 905-615-3200, ext. 5326.

1. I,

Full name of the Volunteer

of

Street address

in the

City, Province and Postal Code

Telephone Number

give my consent and authorize the Corporation of the City of Mississauga (the "City") to do the following:

- use my name;
- take photographs (digital or hard copy), portraits or pictures (collectively called "Images") of me or in which I am included; and/or,
- make audio recordings, video images or mp3 files (collectively called "Recordings") of me or in which I am included;

and use them for the following purposes:

- preparing and publishing advertising and publicity materials on behalf of the City;
- City marketing and promotional programs and campaigns; and
- re-using and re-publishing any Images and/or Recordings of me in any medium.

2. I hereby agree to release and forever discharge, the City, its respective officers, elected officials, employees, representatives, successors and permitted assigns from all liability, whether direct or indirect, and hereby waive all claims, demands, expenses, actions and causes of action which may arise from the publication, reproduction, distribution, modification, collection, disclosure or any other use of the Images and/or Recordings authorized to be collected pursuant to or on this form.
3. I agree to and accept the possibility of flaws, distortions and inaccuracies in the reproduction and/or alteration of the Images or Recordings of me, for whatever reason. I understand and agree that the City has no control over third parties' misuse of the Images and/or Recordings displayed or showcased on the City's website and other publications.
4. I agree that the City may use my name, Images and/or Recordings of me without any payment or compensation to me of any kind.
5. This consent and release form will be governed by the laws of the Province of Ontario.

Consent for Adults (Please complete this section if you are at least 18 years old)

I am 18 years old or more and have read, understand and voluntarily accept these terms and conditions.

Signature

Date Signed

Consent for Minors (Please complete this section if you are consenting for a minor under 18 years old and you are that minor's parent or legal guardian)

I am the parent or legally appointed guardian of the person named at the beginning of this form who is under the age of 18 years old and I have the legal authority to represent and bind that person. I have read this form and understand and voluntarily agree to be bound by its contents.

Name of Parent/Legal Guardian

Signature of Parent or Legal Guardian

Date Signed

Street Address

City and Postal Code

Telephone Number