



University of
South Australia

Consent to use recorded image, video, voice or other representation

Recorded person's details	
Name	
UniSA student ID (if applicable)	
Email	
Recording details	
Purpose	STEM Innovation Experience 2025
Date	1 February 2025 to 10 November 2025
Location	UniSA Campuses (various)
UniSA contact person	Professor Simon Leonard, simon.leonard@unisa.edu.au

1. I understand that my image, likeness, voice, testimonial, name or other representation of me (**Recording**) will be recorded by, or on behalf of, the University of South Australia (**University**).
2. I consent to the University (and anyone acting with the University's authority) using, reproducing or editing the Recording:
 - (a) for the purpose described above;
 - (b) for educational purposes;
 - (c) to promote the University and its available courses and programs; or
 - (d) to enable any product which appear in the Recording to be licensed, distributed, exhibited or sold (including for a commercial return), (**Recording Rights**).
3. I understand that the Recording may appear, or be referenced in, any medium, including written publications, audio, video or other media which may exist in the future.
4. In exercising the Recording Rights, the University will not intentionally disparage, denigrate or damage my name or reputation.
5. I acknowledge that I will not as a consequence of the Recording or providing this consent:
 - (a) acquire any rights over any product which appears in the Recording, or any monetary proceeds which are derived from the sale, licensing, distribution or other use of such product or
 - (b) be paid for the Recording or consent, or for participating in the session at which the Recording will be made.
6. I release the University (and anyone acting with the University's authority) from any claims relating to the use of the Recording as described in this consent form.

Signature of recorded person:

Date:

Name of parent/guardian (if under 18):

Signature of parent/guardian (if under 18):

Date: