



CONSENT FOR PHOTOGRAPHY AND AUDIO/VIDEO RECORDING

The QEII Simulation Program locations (“Simulation Facilities”) are equipped with still photography and audio/video recording equipment. Photographs and recordings will be kept and may be used for educational purposes, with the consent of the participants. Audio/video recordings and photographs may also be used to promote the Nova Scotia Health Authority and/or the QEII Simulation Program, such as by posting photographs or videos on the Simulation Program website, publishing photographs in print materials, or other similar promotional uses, with the consent of the participants.

I, _____ (please print full name), consent to permitting photography and/or audio/video recording during this educational session, and for those audio/video recordings and/or photographs to be used for the following purposes:

Educational purposes

Promotional purposes

OR

I, _____ (please print full name) **do not** consent to permitting photography and/or audio/video recording during this educational session. I understand that if I refuse, it **will not** have a negative effect on my relations with the Nova Scotia Health Authority.

I understand that at any time following the session, I may withdraw my consent. I understand and acknowledge that the photographs and/or recordings may be destroyed at any time without notice to me. I hereby waive any claim for payment arising from or any use made of the photographs and/or recordings in relation to the above noted purposes.

Signature of Participant

Date

Witness

Date