## ANGLICAN DIOCESE OF BRISBANE

## FORM 5: INDEMNITY FORM



Activity		
Date of activity	Starting date	
	Ending date	
Name of	Surname	
participant	Christian name/s	
Indemnity		
	I,	
Signature and date	Signature:  Date:	
Approval for images	footage to use to promote future name) to use photographs and vi promotions. Please circle: Yes I acknowledge that copies of the daughter can be obtained from I give also my consent to my deta	sert parish name) may be taking photographs and video parish events, do you give permission for (insert parish deo footage that may involve your son or daughter in such  No  photographs and video footage involving my son or
Participant's agreement	In consideration of being permitted to attend this activity I hereby adopt and agree to be bound by the above conditions, authorities, and indemnities.	
	Signature:	
	Date:	
	Dutc.	