

Robust Inclusive Impact

CONSENT FOR APPROPRIATE USE OF CLIENT CONFIDENTIAL INFORMATION

I, _____, (full name) the _____
 (relationship to client) of _____ (full name of individual client)
 do hereby consent to photos and video material being taken by Shonaquip Social Enterprise and used for the following purposes:

<i>Tick as applicable</i>	Yes	No
Storing in client folder (hard copy and electronically on the central server)		
Use in reports to funders where appropriate (hard copy and electronically on the central server)		
Printed and/or electronically used in presentations for training purposes		
Publicity and/or media purposes: demonstrating the services offered by Shonaquip Social Enterprise and progress made through their programmes and services. Includes books, pamphlets, Facebook, website, articles etc.		
Use by the production team to manufacture client specific device		

By signing this consent, I confirm that I have read, understood and confirm the following:

- I have authority to represent the client, my _____.
- By approving this authorization and consent form, the client and I hereby waives any right to compensation for the above-stated uses ticked. We also hold Shonaquip Social Enterprise, its affiliated entities, administrators, directors, officers, employees and volunteers harmless from and against any claim for injury, and any compensation, resulting from the activities authorized in this consent form.
- This authorization is effective from the date of signature, until revoked by notifying Shonaquip Social Enterprise in writing.

Signed: _____ Date: _____ Place: _____

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