CONSENT FORM TO PARTICIPATE IN AN AUDIO, VISUAL AND/OR WRITTEN PRODUCTION

1. PARTICIPANT IDENTIFICATION		
First and last name:		
Home address		
Addess: no.: Street:		apt.:
City:	Province:	Postal code:
2. CONSENT		
I, THE UNDERSIGNED,,	participant, give my consent for my advisor	to use the:
 Written production (e.g.: story, quote) Audio production (e.g.: video recording, recorded call) Visual production (e.g.: video recording, photo) 		
in the context of		
I acknowledge their right to use it or allow its use for the period from		
The production may be used for the following purposes:		
Social media (Facebook, Instagram, Twitter, etc.)		
Profesionnal website Other, specify:		
I agree and consent that the following information may be used and disclosed:		
My first and/or last name		
City		
Age		
Other, specify:		
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Completed and signed at:		on
First and last name of participant (printed)	X	