**Please complete the following. Then return the form to the DermNet NZ Editor in Chief as scanned file attached to an email (contact details below).**

I, [insert full name] \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am the owner of image(s) described below. *Append additional sheet if there are more than 3 images.*

Image filename \_\_\_\_\_\_\_\_\_\_\_\_Description \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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I am the subject of the photographs \_\_\_\_\_\_

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Date\_\_\_\_\_\_\_

I freely give my consent for DermNet NZ, the website of DermNet New Zealand Trust, to use copies of these images for an indefinite period. These images may be used for the following purposes:

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Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_