

Voicing Pride – Contributor Release Form

Contributor Full Name:*

Contributor Date of Birth:

Contributor Email:

Contributor Mobile Phone:

By submitting a story or any information to Voicing Pride's platform, you agree to the terms set out in this form, Voicing Pride's Terms of Use available at www.voicingpride.org/website-terms-of-use/, and the Voicing Pride Privacy Policy, which is available at www.voicingpride.org/privacy-policy/.

Contribution:

1. You agree that:
 - (a) anything you submit for publication may be published in its entirety or in an edited form in the context of documenting stories of LGBTQ+ communities across New Zealand high schools, although there is no obligation on Voicing Pride to publish any information you send to us;
 - (b) by providing any stories or information to us, you give us permission to use the stories and information on our website or our social media platforms; and
 - (c) the stories or information you provide to us be deposited in an archive for researchers to access in the future.
2. This agreement only covers not for profit use. Any commercial use of your story or information must be negotiated separately.

You want to be publicly identified as: _____

You do/do not wish to include the name of your high school in the submission.

If you wish to associate your submission with your high school, state the name of the high school:

Contributor Signature: _____

Parental Signature (if the contributor is less than 18 years):

**The contributor's contact name, email address and mobile phone will not be published.*