

SUNY Geneseo LGBTQ

Photo Consent Form

Thank you for consenting to use of photos of you which we may take at SUNY Geneseo for activities and programming related to activities featured in geneseo.edu/lgbtq and/or geneseo.edu/safezone. Photos taken will be used for a variety of different materials which we use to inform the college community and the public through the websites listed above about educational programming and activities that we do. Occasionally the websites will include photographic images (moving and still) of participants, the surrounding areas, and on occasion observers participating in our educational programming such as Safe Zone trainings. This photo consent form will allow us to use these photos to enhance and accompany the campus websites listed above to illustrate the variety of work and activities we engage.

By completing the form below, you give us full consent to take photos and use these images and personal information you supply alongside the images (such as a name, major, class standing [freshman, sophomore, junior, senior], or departmental affiliation) to actively promote the work and programming of LGBTQ and/or Safe Zone related activities at the college. The images will not be used for any other purpose. You may rescind and/or specify your consent to use of your images at any time by emailing safezone@geneseo.edu

Your details:

| | | | | | | |
|-----------------------------------------|-----------|------------------|-----------|-----------|-------------------------|--|
| First Name | | Last Name | | | | |
| Address | | | | | | |
| | | | | | | |
| | | Zip Code | | | | |
| Pronouns | | | | | | |
| Email | | | | | | |
| Year (if applicable, circle one) | Fr | So | Jr | Sr | Major/Department | |

Please state here if there are any ways in which you do NOT want us to use photo(s) of you (website, flyers, promotional materials, etc):

| | | | |
|-------------------------------------|--|-------------|--|
| Signed or type if emailed | | Date | |
|-------------------------------------|--|-------------|--|

Confidentiality Statement

Other than as specified above, the information that you give us here will only be used to contact you about these photo(s). We will not share the details recorded on this form on to any other organization or campus agency without your permission.

| | | | |
|-------------------------------|--|----------------------|--|
| For internal use only: | | | |
| Name of event | | | |
| Location of event | | Date | |
| Image reference(s) | | | |
| Contact name | | Contact phone number | |

Please return completed forms to Daniel Jacques, SUNY Geneseo, Chemistry Department, ISC 329. 1 College Circle, Geneseo, NY 14454 or email safezone@geneseo.edu