

Consent Form/Permission Letter

The Canadian Society for International Health (CSIH) is committed to protecting your privacy.

Before signing this release, please read it carefully and make sure you understand and are comfortable with the terms.

Rights to the Use of a Story Submission for AIDS 2018

I hereby give permission to the Canadian Society for International Health (CSIH) to use my story submission in any publications and/or promotional materials produced by CSIH for the Canada Exhibit and related activities, to be showcased onsite at the International AIDS Conference 2018 and satellite events in any print or electronic format. These publications or events include, but are not limited to, brochures, videos, reports, and workshops. I understand that these publications and/or promotional materials produced by CSIH may be printed and disseminated across Canada and possibly around the world, in print, video and on the Internet.

By signing below, I grant CSIH the right and permission to use these materials described herein.

- Name (please print): _____
- Sign here: _____

I hereby give permission to CSIH to display my name at the Canada Exhibit, if my story is selected.

If you are under 18 years of age please ensure that a parent/guardian reads and signs this consent form.

For Parents/Guardians

By signing this consent form, I understand and I am comfortable with the terms and descriptions in this document. Furthermore, I support the decision of the youth signing this consent form.

- Name of Parent/Guardian: _____
- Signature of Parent/Guardian: _____