

PRIVACY DISCLOSURE CONSENT FORM  
**Beyond Disability Inc**

**ABN: 82 846 344 613** A registered tax exempt charity in Australia Webpage [www.bdi.org.au](http://www.bdi.org.au)  
Registered for GST Registered Number A0037035K E-mail: [helpful@bdi.org.au](mailto:helpful@bdi.org.au)  
mail to Girrahween House, PO Box 1451 Pearcedale 3912. Tel/Fax 03 59776 547. Secretary: A Lewis

This form is used to obtain consent from BDI's members, their parents and carers and BDI's volunteers, for the proposed disclosure of their personal information and photos or media as detailed below.

**Acknowledgement and Consent**

By completing and signing this form I provide my express acknowledgement and consent for the purposes of the *Privacy Act 1988* (Cth), for Beyond Disability Incorporated (BDI) to disclose my personal information for the following purposes:

1. BDI may contact support groups for the purpose of promoting the BDI programme(s) and / or obtaining assistance or sponsorship support fir BDI members, and in doing so may disclose personal information about me and my personal circumstances to these parties including my first name, age and disability (as applicable)
2. BDI may publish photographs and any other media of me in its publications, to promote the program, on its website via other internet websites in order to promote the BDI programme(s)

**CONDITIONS**

Please specify any conditions (if any) relating to disclosure of your personal information which you would like us to adhere to

.....

**BDI Privacy Policy**

In signing this disclosure consent form , I confirm that I have read and understood the BDI "Privacy Policy" available for download on the BDI website

**Name:** ..... **Date:**.....

**Signature of applicant, parent, carer or volunteer (as applicable):**

..... Date.....

**Address:**.....**Telephone:**.....

**This consent may be withdrawn at any time by providing 7 days notice in writing to the above address.**