



Consent form for the disclosure of a photograph of your face

This form must be completed for each person whose face is recognizable and identifiable on a photograph submitted.

I, the undersigned _____, hereby grant CEN permission to use and publish photographs submitted as part of the **2024 CEN Photo Contest** in which my face appears, without incurring any debt or liability.

I certify that I am of legal age and fully competent to grant this permission.

By signing below, I confirm that I have read, fully understand and accept the terms and conditions set out in this form.

Name :

Date :

E-mail :

Signature :

Please send this form when submitting your photographs to coordination@cen.ulaval.ca