

Consent Form

Please read through this form and sign where indicated

Who we are

Aardvark Music is a Melbourne based not for profit organisation that provides song-writing and music opportunities for young people aged between 14 and 24 who have an interest in music and need for mental health support and connecting with a like minded community. Music therapists, musicians and youth mentors work with young people to write, record and perform original music together in groups while creating a community to stay connected to.

Our program

The Aardvark Music Sessions involve a weekly commitment to attend 3-hour workshop sessions in person or 2-hour workshop if online for the 14-week duration of the program and a weekend recording session in a professional recording studio, or online equivalent. Participants will be invited to attend additional monthly Alumni sessions, workshops, group projects and performances after they have completed to the Aardvark Music Sessions.

Code of Conduct

The Aardvark Music Code of Conduct is in place to facilitate the safety and full engagement of all participants. All participants must agree to abide by and sign the Code of Conduct, and adhere to any guidelines in place from time to time.

Photography, video and audio recordings

Photography, video and audio recordings are used to capture the group songwriting process. Participants can request not to be photographed, filmed or recorded at any time, and every effort will be made to accommodate your request, though this may impact your ability to fully participate in the program. For example, if you are a singer, it may not be possible to exclude your voice when recording a song or you may not be able to participate in a performance that is being recorded. Program facilitators are happy to discuss this with you and answer any questions you may have.

We may share recorded music and media in many countries, including Australia. We may use your picture, voice, film or story on the internet, television, in newspapers, our fundraising materials and publications all over the world.

To help engage with young people, we work with governments, the media, non-governmental organisations and members of the public. We may also share media of you for use by other organisations who work with us, other NGOs and other partner, donors and media organisations. They may use this media to publicise our work, their work with us, or the issues on which we work. They may also publish them in their own communications or publications.

We will keep your information in a safe place, and if your identity needs to be protected, we will do everything we can to protect it.

We understand you may change your mind in future. You can contact us at any time if you do not want us to continue to use media of you, or if you have any questions or complaints about how your media is being used.

Ownership of music created within the program

All lyrics and music contributed to, developed or created during the Aardvark Music program becomes the intellectual property of Aardvark Music at the time it is contributed, developed or created. All rights and royalties from any sale of content contributed to, developed or created during the Aardvark Music program will be directed to Aardvark Music as owners of the content.

By contributing content during the program, you confirm the content is your own original work and if it includes other people's work, you have permission to use their work in the program.

Emergency contact

There may be times when we need to contact someone about your participation in the program. If we contact your nominated emergency contact, we will make our best efforts to protect your privacy and only share information to the extent necessary and in your best interests.

Medical treatment

By participating in the program, you authorise Aardvark Music to seek any medical treatment you may need in the event of an accident or emergency. You may include details below of any medical conditions we should be aware of to assist you to obtain appropriate medical support in the event of an emergency.

Key Information	
Full name of participant:	Age:
Telephone / Email / Address:	
Full name and contact number of emergency contact:	
Any medical conditions:	
Consent	
I give my consent to participate in the program on the terms outlined in this document.	
Participant signature (if >18):	Date:
Parent / guardian signature (if <18):	Date: