

Thank you for considering sharing your conversation about mental health/addiction recovery with us. We intend to bring dignity and respect to everyone involved, including you, as well as others who struggle with addiction, other mental health issues, family members, neighbours and members of our communities.

We want to give you the opportunity to withhold or give permission for us to share your story in the way that you decide.



Please initial next to the option to indicate that you give consent:

I give my consent for my likeness (video/photo/voice) and story, as I told it to representatives from the SUN Network, to be published on the internet via social media (i.e. Twitter, Facebook, YouTube, etc.). This will be done in the format of video or audio  
or

I give my consent for my likeness (video/photo/voice) and story, as I told it to representatives from the SUN Network, to be published on the internet via social media (i.e. Twitter, Facebook, YouTube, etc.) but I want my face to be blurred out as I want my anonymity protected. This can be done in the format of video with my face blurred or audio.

or

I give my consent for my voice and story, as I told it to representatives from the SUN Network, to be published online via social media (i.e. Twitter, Facebook, YouTube, etc.). This will be done from the audio recording of parts of my conversation with the SUN Network. This can be done in the format of video or audio.



The way I want to be referred to in the recording is:

First name only,  Pseudonym (made up name),  First Initial only,  
\_\_\_\_\_ (other)

I understand that if I change my mind, I can ask for the SUN Network to remove my story from SUN Network's social media, which will be honoured. But I understand that the nature of the internet includes that copies might have been made online which are out of control of SUN Network.

Service User Name / Signature \_\_\_\_\_

Date: \_\_\_\_\_