

**Consent for publication of personal material
in the Medical Journal of Australia**

Level 19, Town Hall House
456 Kent Street
Sydney NSW 2000
Mail: Locked Bag 3030
Strawberry Hills NSW 2012
Switch: +61 2 9562 6666
Fax: +61 2 9562 6699
Email: mja@mja.com.au
www.mja.com.au

Published by Australasian Medical
Publishing Company Proprietary Limited
ABN: 20 000 005 854
ACN: 000 005 854

Name of person described or pictured:

Title of article:

Corresponding author's name:

MJA manuscript number (if known):

I _____ give permission for material about me (or my child/ward/relative) to be published in the Medical Journal of Australia (MJA), and other publications produced by the MJA, in print and online. The MJA is a professional medical journal for doctors, but its website may be accessed by the general public. The material will not be used for advertising, packaging or financial gain.

I understand that my (or my child's/ward's/relative's) name will not be published and that every attempt will be made to ensure anonymity. I understand, however, that complete anonymity cannot be guaranteed.

Please tick the appropriate box below:

I have read the manuscript or a general description of what the manuscript contains and seen all images of me (or my child/ward/relative) that are proposed to be published.

or

I have been offered the opportunity to read the manuscript and view the images of me (or my child/ward/relative) that are proposed to be published, but I waive my right to do so.

Signed:

Date:

Print name

Relationship to person on whose behalf you are granting permission, if applicable