



CONSENT FORM INDIVIDUAL

INTERNAL AND EXTERNAL

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I, [include full names and surname and employee number], hereby grant permission that any data, information, footage or material (including material in the form of photographs, video, film and/or audio) that may lead to the identification of myself, may be used for the following:

YES	NO	COMMUNICATION PLATFORM / CHANNEL
		Content produced for Mediclinic on the topic of its 2023 hackathon, to be used for internal and external purposes, including on the Group's website - www.mediclinic.com - and social media.

(Please indicate 'yes' or 'no' to the above with a check/cross 'X')

By signing this consent form you consent and authorise Mediclinic to use your data, information and/or image (including by way of photographs, video, film and/or audio) wherein you can be identified, for both internal and external publication, publicity and promotion purposes.

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You will not receive any payment or other consideration for the use reflected herein.

Signed

Print name

Date

Contact number

Email address

Location/Hospital