



NCCIH Art Waiver

ISC and NCCIH communicable disease control health messaging through art proposal

I, _____, hereby consent to the use of my artwork in future public health campaigns by Indigenous Services Canada (ISC) the National Collaborating Centre for Indigenous Health (NCCIH), and in collaboration with Indigenous communities, national organizations, and other public health partners, for the purposes of education and health promotion. The public health campaigns will address communicable disease prevention, including topics but not limited to Vaccine Preventable Diseases (VPD), Immunizations, Sexually Transmitted and Blood Borne Infections (STBBI), Communicable Disease Emergencies (CDE), Tuberculosis (TB), Infection Prevention and Control as it relates to Communicable Diseases.

I understand that this call for artwork is intended to promote Indigenous grassroots health messaging. I thereby self-identify as an Indigenous person of Turtle Island (Canada).

I understand that I may encounter my artwork in physical clinical spaces, other sites of public health promotion, and within online social media platforms. The formats of the health campaigns may include but are not limited to posters, pamphlets, booklets, resource materials, social media posts, television, radio, and email alerts. I also understand that my artwork may ultimately not be featured in these health campaigns.

I certify that I am the full copyright holder of this artwork and can grant ISC, NCCIH, and their partners permission to feature it in public health campaigns in perpetuity. I retain copyright and may share it as I wish elsewhere.

I certify that I have not used generative AI (artificial intelligence) in the creation of this artwork.

I agree that I shall have no claim against the ISC, NCCIH, or against anyone accessing these health promotion campaigns, whether online or in print.

If accepted, I understand that I will receive \$100 as an individual submission or \$250 as a group submission. If submitting as a group, only 1 designee of the group will receive the honorarium of \$250. If selected as a grand prize winner, I understand that I or my group will receive \$4000.

By signing, I confirm that I am over 18, or if under 18, my legal guardian's consent is provided.



NCCIH Art Waiver

Artists Full Name: _____

Legal Guardian Name (if applicable): _____

Address: _____

Email: _____ Phone Number: _____

Art Labeling Information (Artist(s) name(s), medium, size or duration, year created):

Signature (or that of legal guardian if applicable): _____ Date: _____



National Collaborating Centre
for Indigenous Health



Indigenous
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Indigenous Services Canada (ISC)

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