



Family Tree Clinic

Photo/Video Model Release Statement

I hereby authorize Family Tree Clinic, hereafter referred to as "Company," to publish photographs & videos taken of me or my child on _____ (date), and my or my child's name and likeness, for use in the Family Tree Clinic's print, online and video-based marketing materials, as well as other Company publications.

I hereby release and hold harmless Family Tree Clinic from any reasonable expectation of privacy or confidentiality associated with the images specified above.

I further acknowledge that my participation is voluntary and that I will not receive financial compensation of any type associated with the taking or publication of these photographs or participation in company marketing materials or other Company publications. I acknowledge and agree that publication of said photos confers no rights of ownership or royalties whatsoever.

I hereby release Family Tree Clinic, its contractors, its employees, and any third parties involved in the creation or publication of marketing materials, from liability for any claims by me or any third party in connection with my participation.

Child's name

Parent/Guardian's name

Signature

Date

Address

City, State and Zip

Phone number or Email