



## PHOTO RELEASE FORM

I, \_\_\_\_\_, hereby grant *Align Equine Veterinary Services* and its employees/agents permission to take photographs, videos and/or digital recordings of myself and/or my animals, and to publish those photographs/videos/digital recordings for any lawful purpose, including, but not limited to, their website, social media accounts, and promotional materials, either digital or in print, in perpetuity.

I also DO / DO NOT (circle one) grant permission to use my name and/or my animal's name.

By signing and dating this document I authorize *Align Equine Veterinary Services* to edit, alter, share, remix, tweak, build upon or in any way alter the photograph(s)/video(s) mentioned above. I also waive any rights of privacy or compensation associated with the use of my or my animal's image(s) and name(s) for the personal or commercial purposes outlined above.

I also understand that *Align Equine Veterinary Services* is not responsible for any expense or liability incurred as a result of my participation in this recording, including medical expenses due to any sickness or injury incurred as a result. If I wish to revoke this permission, I agree to do so in writing (either through electronic or letter mail).

I have read and understand this statement and am competent to execute this agreement.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Printed Name*

\_\_\_\_\_  
*Signature of Parent/Guardian*  
*(if the individual signing is under 18 years of age)*