

Dear Customer/Patient,

Thuasne USA, and Townsend Design are medical providers, that enjoy sharing success stories from patients and customers. We would like to share your experience with our products with the world. If we are granted permission to use your materials, we promise to only use it for educational and marketing purposes.

Thank you

Photo/Video Release Form for Endorsement(s)

Thuasne USA/ Townsend Design
4615 Shepard Street
Bakersfield, CA 93313

I grant to Thuasne USA and Townsend Design, their employees, sales representatives, medical professionals (customers), and contracted photographers/videographers the right to take, or use, photographs/videos of me and publish written and/or video testimonials of my experience with these companies' products. I agree that Townsend Design may use such photographs/videos of me and/or written and/or video testimonials with or without my name and for any lawful purpose, including for such purposes as publicity, illustration, advertising, and social media or web content.

I waive any right to inspect or approve any edits made to the images or testimonial I provide. I agree this releases these companies and any, and all its representatives from all monetary obligations or payments to me or any of my authorized representatives for use of video, films, photographs, image and/or voice of myself. I agree to release and hold harmless these companies and their agents or employees from any claims arising from the related use of the materials I voluntarily provide.

I have read and understand the above:

Signature _____

Printed name _____

Date _____

Signature, parent or guardian _____ (if under age 18)