



Photo & Video Release Form

I, _____ hereby grant permission to **Linked With Meg** and its employees to take photographs or videos of me, my likeness, and my overall appearance during my visit/appointment.

I understand that the photographs and videos may be used for promotional and marketing purposes, including but not limited to social media, website, print materials, and other forms of marketing. I understand that **Linked With Meg** has the right to edit and use these photographs and videos as they see fit.

I also understand that I will not receive any form of compensation or financial remuneration from the use of these photographs or videos.

I also understand that once the photographs or videos are used, **Linked With Meg** has no control over the use of the images by third parties, who may also use the images for their own purposes.

I release and discharge **Linked With Meg**, its owners and employees from any and all claims, demands, or causes of action that I may have against them arising out of or in connection with the use of the photographs or videos.

I hereby acknowledge that I have read and fully understand the terms of this release and that I have had the opportunity to ask any questions that I may have before signing.

By signing this release, I certify that I am at least 18 years of age. If under 18 years of age, a parent or legal guardian must sign this release.

Client Name

Client Signature

Date

Parent/Guardian Name
(if under 18)

Parent/Guardian Signature

Date