

## Arizona Goldens LLC

# Photo & Video Release Form

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I, the undersigned, do hereby consent and agree that Arizona Goldens LLC (“AZG”), its employees, or agents have the right to take photographs, videotape, or digital recordings of me, my child, or my dependent and to use these in any and all media, now or hereafter known.

I further consent that to use of mine or my child’s name and identity may be revealed therein or by descriptive text or commentary and may contain certain information that is protected under the Health Insurance Portability & Accountability Act (“HIPAA”). These disclosures are dictated by AZG HIPAA Privacy Notice located on our website or provided to you.

This release of photo, video, and in-person account information includes but not limited to:

- Starting, current, or ending communication levels,
- Information relating to the client’s progress in AZG programs,
- Interactions between staff, equipment, and service animals,
- Personal stories about progress from family members,
- Sleeping patterns,
- Behavioral Patterns including progress in treatment of self-stemming, self-injurious behaviors, or repetitive behaviors,

I do hereby release to Arizona Goldens LLC, its agents, and employees all rights to exhibit this work in print and electronic form publicly or privately and to market and sell copies. I waive any rights, claims, or interest I may have to control the use of my or my child’s identity or likeness in whatever media used.

I understand that there will be no financial or other remuneration for recording me or my child, either for initial or subsequent transmission or playback.

I also understand that Arizona Goldens LLC is not responsible for any expense or liability incurred as a result of my or my child’s participation in this recording, including medical expenses due to any sickness or injury incurred as a result.

I represent that I am at least 18 years of age, and if applicable legal guardian of the child and have read and understand the foregoing statement, and am competent to execute this agreement.

Your Name: \_\_\_\_\_ Child Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_