

Look Whoo's Talking, LLC
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<https://www.facebook.com/lookwhoostalkingllc>

Consent and Release of Photographs / Videos

I, _____ (client or parent/guardian name) give consent to Look Whoos' Talking, LLC and / or Chelsea Knowles, MS, CCC-SLP and/or any party authorized by [Private practitioners name or private practice name] to photograph and/or video record _____ (child/client/model name) in connection with his/her therapy sessions, for any purpose subject to the therapist's discretion including but not limited to educational publication, for teaching purposes, and demonstration of progression of his/her skills.

I authorize Look Whoos' Talking, LLC and / or Chelsea Knowles, MS, CCC-SLP to use pictures of _____ (child/client/model name) for promotional purposes (ex. brochures, website, social media, advertisement, etc.)

I acknowledge that I will receive no financial compensation for providing consent since my participation with Look Whoos' Talking, LLC and / or Chelsea Knowles, MS, CCC-SLP in providing my consent and release is voluntary.

I hereby release Look Whoos' Talking, LLC and / or Chelsea Knowles, MS, CCC-SLP, their contractors, their employees and/or any third parties involved in the creation or publication of Look Whoos' Talking, LLC and / or Chelsea Knowles, MS, CCC-SLP from any and all liability that may arise in connection with the expressed and implied use of all photographs and videos outlined in this form.

I reserve the right to revoke this agreement at any time. I understand that my right to revoke must be done in writing.

I am the client, parent or legal guardian of the person/child/client/model named below and have the legal authority to execute this consent and release.

Print Name of Child/Client/Model

Date

Signature of Client/Legal Representative

Relationship to Child

Release of Photographs / Videos