

Photography Release Form

I, _____, hereby acknowledge that this Photography Release Form became effective on _____ and I have entered into this Agreement freely and voluntarily and fully understand every provision contained within this Agreement.

I hereby authorize Renew Aesthetics and Wellness to edit, change, copy, alter, and make any use of all photographs of me to be used for promotional and/or marketing materials.

I hereby acknowledge, understand, and fully agree that I will not be entitled to any type of monetary payment or any sort of charge, royalty, or rights under this Agreement or for my consent to this Agreement.

I hereby expressly authorize, and permit Renew Aesthetics and Wellness, the unlimited use and benefit of my photograph, image, and likeness for, but not limited to, publication on the internet, magazines, journals, books, articles, etc., provided that it is done for lawful purposes.

Upon the usage of my photographs, image, and likeness, I hereby consent to such materials becoming the sole property of Renew Aesthetics and Wellness, that I will no longer be entitled to them.

I hereby release all right to any, but not limited to, claims, rights, liability, demands, and/or any causes of action by me or my representatives, heirs, successors, assigns, or anyone else.

Furthermore, I hereby waive my right to any royalty or any other compensation with regard to the usage of the photos referred to in this Agreement.

Patient Signature: _____

Patient Name: _____

Witness Name: _____

Witness Signature: _____

Date: _____

(985)214-4795



1375 Corporate Square Dr. | Slidell, LA 70458



3434 Houma Blvd. Suite 202 | Metairie, LA 70006

