



# Sanchez & Craig

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## Orthodontics

### Model / Testimonial Release

I hereby give \_\_\_\_\_ the absolute right and permission to publish or use my testimony, photographic portraits or pictures of me, or in which I may be included in whole or in part, or composite or distorted in character or form, in conjunction with my own fictitious name, or reproduction thereof in color or otherwise, made through any media at their studios or elsewhere, for art, advertising, trade or any other lawful purpose whatsoever

I hereby waive any right that I may have to inspect and/or approve the finished product or the advertising copy that may be used in connection therewith, or the use to which it may be applied.

I hereby release, discharge, and agree to save \_\_\_\_\_ from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of said pictures, or in any processing tending towards the completion of the finished product.

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Model Printed Name

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Model Signature

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Date

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Street Address

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City, State, and Zip

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Witness

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Parent or Guardian

(Required only if model is a minor)

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