



CONSENT AND RELEASE FOR USE OF LIKENESS

EFFECTIVE AS OF THE DATE SHOWN BELOW I, _____

GIVE PERMISSION AND APPROVAL TO STOCKTON FAMILY & COSMETIC DENTISTRY FOR PAST, PRESENT, AND FUTURE USE AND OWNERSHIP OF MY LIKENESS IN PHOTO OR OTHER IMAGES TO BE USED FOR PUBLISHING IN PHOTOGRAPHY, VIDEO, ANY MEDIUM (INCLUDING WITHOUT LIMITATION, PRINT PUBLICATIONS AND PUBLIC BROADCAST), AND FOR ANY LAWFUL PURPOSE, INCLUDING WITHOUT LIMITATION, TRADE EXHIBITION, ILLUSTRATION, PROMOTION, PUBLICITY, SOCIAL MEDIA, WEBSITE, INTERNET, ADVERTISING, AND ELECTRONIC PUBLICATION

I RELEASE STOCKTON FAMILY & COSMETIC DENTISTRY FROM ALL CLAIMS FOR LIBEL, SLANDER, INVASION OF PRIVACY, INFRINGEMENT OF COPYRIGHT OR RIGHT OF PUBLICITY, OR ANY OTHER CLAIM RELATED TO THE LIKENESS. THIS RELEASE INCLUDES WITHOUT LIMITATION ANY CLAIMS RELATED TO BLURRING, DISTORTION, ALTERATION, OPTICAL ILLUSION, DIGITAL ALTERATION, USE IN COMPOSITE FORM, WEATHER INTENTIONAL OR OTHERWISE, OR USE OF A FICTITIOUS NAME, THAT MAY OCCUR OR BE PRODUCED IN THE PROCESSING OR PUBLICATION OF THE LIKENESS.

THE UNDERSIGNED WARRANTS THAT THE UNDERSIGNED HAS READ THIS CONSENT AND RELEASE PRIOR TO THE SIGNING OF THIS DOCUMENT, THAT THE UNDERSIGNED UNDERSTANDS IT, AND THAT THE UNDERSIGNED FREELY ENTERS IN THIS CONSENT AND RELEASE.

SIGNED

DATE