



Therapy Dogs of Long Island

Dogs are Good Medicine!

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PHOTOGRAPH, VIDEO, AND INTERVIEW RELEASE

I authorize Therapy Dogs of Long Island to photograph, videotape, or interview me and to use such photographs, videos, or interviews, as well as my name, in promotional materials, including brochures, advertisements, newspapers, websites, videos, or other materials in print, audio, electronic, or visual media.

In addition, I voluntarily waive any right, cause of action or demand of any kind whatsoever resulting from the photographs, videos, or interviews from which any liability may or could accrue to Pro Bono Partnership.

I also understand that Therapy Dogs of Long Island will not give me any compensation for using the photographs, videos, or interviews in its promotional materials. Thus, by signing this document, I waive any rights to any compensation now or in the future.

I understand that this document represents the entire agreement and understanding between Therapy Dogs of Long Island and me with respect to the release of photographs, videos, or interviews.

Name _____

Signature _____

Organization _____

Today's Date ____/____/____

If a guardian fill out below

Father, Mother or Legal Guardian _____

Signature _____

Model's Name _____

If a Minor, Minor's Date of Birth ____/____/____