



COPPER TREE RETREAT
MESSAGE • MEDSPA

Photo / Video Consent

I hereby consent and agree that Copper Tree Retreat has the right to take or use photographs of me (and / or my property) and to use these in any and all media worldwide including online, now or hereafter known, and for any purpose whatsoever.

I hereby release to Copper Tree Retreat all rights to exhibit this work in print and electronic form publicly or privately and to market copies. I waive any rights, claims or interest I may have to control the use of my identity or likeness in the photographs and agree that any uses described herein may be made without compensation or additional consideration of me.

I represent that I am at least eighteen years of age, have read and fully understand the foregoing statement and am competent to execute this agreement.

Name: _____ Date: _____

Address: _____

Signature: _____

(If under 18)

Parent / Guardian Name: _____

Parent / Guardian Signature: _____

Witness by Provider: _____