BUCKEYE THERAPY SERVICES, LLC

VIDEO/PHOTOGRAPH RELEASE

Due to the many advancements in technology, we have the benefit of capturing your child's time in the therapy gym via photographs and video. This allows us to use these types of media to show you what your child is doing when you are not able to attend therapy sessions. The photos and videos will only be shared with parents and caregivers of the below listed child either in the waiting room or via private email. Any such material is treated as highly confidential and will not be used for public viewing.

I DO give permission for my child's therapist to photograph or videotape my child during his/her therapy sessions. I understand that these images will only be shared between my child's therapist and me.

_____ I DO NOT give permission for my child's therapist to photograph or videotape my child during his/her therapy sessions.

Child's Name_____

Parent / Guardian's Name _____

Date _____