



## Rehab for Life Photo Release Form

### PHOTO RELEASE FORM

I hereby grant permission to Rehab for Life to use photographs and/or video of me in publications, news releases, online, and in other communications related to the mission of *Rehab for Life*.

(Signature of Adult, or Guardian of Children under age 18)

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

**Thank you!**