KINDLY CANINES & ALLIANCE OF THERAPY DOGS PHOTOGRAPH AUTHORIZATION RELEASE FORM

Instructions for ATD member: Please type or print legibly. Follow all facility rules regarding photographs, including filling out a facility photo release form if requested.

For the privacy of those whom we visit and to protect both ATD and our members from liability, members must have an ATD Photograph Authorization Release Form signed

prior to taking any photo which identifies any individual (e.g. face, tattoo, birthmark, scar, etc.). The signed ATD photo release form must accompany any submission to an

ATD-managed publication/social media platform. A facility/organization photo release may not be used instead of the ATD photo release.

I do hereby consent, without the promise of compensation of any kind, to grant Alliance of Therapy Dogs, a registered non-profit 501(c)(3) corporation

headquartered in Wyoming, its successors and assigns, including those acting under its permission, the right to reproduce, copyright, publish, circulate, or

otherwise use photographic reproductions or likenesses or videotape segments of me and or my name.

This authorization and release covers the use of said material in any published form and any medium of advertising, publicity, or trade in any part of the world,

including the Alliance of Therapy Dogs News Magazine, website, presentations, and social media.

This agreement fully represents all terms and considerations and no other inducements, statements, or promises have been made to me. I fully understand

that no monetary payment will be made to me for such uses as described above.

Please return this signed and dated form with any photos you submit for Alliance of Therapy Dogs' publications and social media use.

Alliance of Therapy Dogs P.O. Box 20227, Cheyenne, WY 82003 office@therapydogs.com

Signature	Date
Printed Name	
Guardian Signature (if necessary)	Date
Guardian Printed	