

Photo/Audio/Video Release Waiver Form

I, _____, hereby authorize _____ to use my before and after photos, audios, videos, and/or portrait and related textual information such as testimonials, clinical discussions, or treatment information including descriptions with or without my name, or with a fictitious name (my protected health information).

This protected health information is being used or disclosed for the purpose of education, marketing or as (s)he sees fit for the advancement of aesthetic medicine, clinical research or educational viewing by other aesthetic professionals, and in the promotion of aesthetic medicine and/or Lutronic's products.

I understand that I have the right to revoke this authorization, in writing, at any time by sending such written notification to the Health Care Provider's address at:

Mailing Address:

or if Lutronic Research Clinic: 19 Fortune Drive, Billerica, MA 01821

Email Address: _____

At all times, the identity of patient is to be held as a priority, eye blocks may be used to protect privacy when needed.

By signing below, I am indicating that I have read and understand the "Consent for Photography/Video" form. I am either the patient or have the authority to give consent for the patient. My questions regarding this consent have been answered. I agree:

1. To allow the recording of my image and voice (e.g., photographs, audio, or video).
2. To distribute my image or recording in any medium, be it print or electronic form, which may include the Internet.
3. To grant permission to Health Care Provider and Lutronic Aesthetics Inc. to reproduce the images or recording for marketing or educational purposes worldwide.
4. That there is no reimbursement for the right to take, or to use my photograph or video or recording.

Authorizer's Printed Name _____ Phone _____ Email _____

Authorizer's Address _____

Authorizer's Signature _____ Date _____

Please email a scanned copy of this form along with images to pcardarelli@lutronic-usa.com

Disclaimer: This document and the information in it does not constitute legal advice. It is also not a substitute for legal or other professional advice. Users should consult their own legal counsel for advice regarding the application of the law and this document as it applies to the HIPAA regulations.