



PHOTOGRAPH AND MEDIA RELEASE

For valuable consideration given and which is hereby acknowledged, the undersigned hereby grants to the **EQUI-KIDS THERAPEUTIC RIDING PROGRAM**, permission to take or have taken still and/or moving photographs and films, including, but not limited to, television pictures of myself or my (son/daughter/ward) _____, and consents and authorizes the **EQUI-KIDS THERAPEUTIC RIDING PROGRAM**, and its advertising agencies, news media and any other persons interested in the **EQUI-KIDS THERAPEUTIC RIDING PROGRAM**, and its work, to use and reproduce the photographs, films, and pictures and to circulate and publicize the same by all means including without limiting the generality of the foregoing, newspapers, television media, brochures, pamphlets, instructional, clinical and/or research materials and books.

With respect to the foregoing matters, no inducements or promises have been made to me/us to secure our/my signature(s) to this release other than the intention of the **EQUI-KIDS THERAPEUTIC RIDING PROGRAM**, to use or cause to be used such photographs, films and pictures for the primary purpose of promoting and aiding the program and its mission.

Dated: _____

Participant/Parent/Guardian/Caretaker

****NON-CONSENT FOR PHOTOGRAPH****

For reasons that I am not obligated to disclose, ***I DO NOT GIVE CONSENT*** for photographs, either still or moving, or any television or news media, to be taken of myself, or my son/daughter/ward, by the **EQUI-KIDS THERAPEUTIC RIDING PROGRAM** or any persons working on behalf of said program. I understand that a **RED MARK** will be placed on the record kept in the administrative offices of the program, which will designate that photographs are not allowed of myself or said person.

Dated: _____

Student/Parent/Guardian/Caretaker