

PHOTO
CONSENT



I hereby authorize _____ to use my photo, video and/or information related to my experiences with the company's eyelash extension services. I understand that this information will be used in social media, including affiliated company websites, Instagram, Twitter, Facebook, Snapchat, and for marketing, advertising, and promotional purposes. _____ will disclose to me, or where appropriate, the specific information and/or photo or video advertised prior to release in social media.

My consent is hereby granted as a public service to _____, without expecting payment. I release _____ from all liability, which may arise from the use of such information and/or photo or video.

I prefer that (if necessary):

- My first name be used
- My social media handle be used @ _____
- No name be used

I understand that I can revoke this release any time in writing and that the use of any of my photos, video and/or information authorized by this release will immediately cease.

Please print:

Name: _____

Email: _____

Cell: _____

Signature: _____ Date: / /