



Photo Release Form

Date _____

I grant to Town & Country Animal Hospital, its representatives and employees the right to take photographs of me and/or my pet, to copyright, use and publish the same in print and/or electronically.

I agree that Town & Country Animal Hospital may use such photographs of me and/or my pet with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

Town & Country Animal Hospital may take photos of me and/or my pet. I grant permission to use *my name & image and/or my pet's name or image* in the context of marketing the business through our website and social media marketing.

Town & Country Animal Hospital may take photos of *my pet*. I grant permission to use *my pet's name or image* in the context of marketing the business through our website and social media marketing.

NOTES: _____

Signature _____

Printed name _____

Client Number _____