

## **HUDEC DENTAL SOCIAL MEDIA CONSENT FORM**

I hereby give Hudec Dental permission to take photographs and videos of me for the purpose of posting on Hudec Dental's social media sites (Facebook, Instagram, etc.) and other digital media sites regarding the Relax. Smile. Serve. Scholarship. The purpose of this is to promote Hudec Dental's company culture and increase exposure of their services.

I hereby release and discharge Hudec Dental from any and all claims arising out of use of the photos or videos.

I have read the foregoing document and fully understand its contents. I give this consent

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Student Name Sign		ature	Date	
Parent/Guardian N	 Name	Parent/Guardian Signature	_	

voluntarily.

<sup>\*</sup> If under the age of 18 a Parent/Guardian Signature is required