

Date: \_\_\_\_\_

## **Social Media Authorization Form**

I hereby provide Oasis Animal Hospital permission to take photographs and videos of me and my pet for the purpose of posting on Oasis Animal Hospital's Facebook page, clinic website, Instagram, YouTube, and any other social media used by Oasis Animal Hospital. ☐ I agree ☐ I do NOT wish for Oasis Animal Hospital to use my pet's photos/videos Oasis Animal Hospital has my permission to use: (Check all that apply) ☐ My pet's full name ☐ Only my pet's first name and/or nickname: \_\_\_\_\_ ☐ Reason for hospital visit I allow Oasis Animal Hospital to edit, alter, copy, or distribute the photos/videos for social media advertising and/or marketing. ☐ I agree I understand that I will not receive any compensation, payment, goods, or services for any usage of photography or videos. ☐ I agree I hereby release and discharge Oasis Animal Hospital from any and all claims arising out of use of the photos. ☐ I agree Pet(s) Name: \_\_\_\_\_ Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_