



**David L. Goldstein DMD
Pediatric Dentistry**

7651-C Ashley Park Court Suite 410 • Orlando, Florida • 407-295-KIDS (5437)
www.smilesdrdavid.com

Photo Consent Form

I hereby give David L. Goldstein DMD, Pediatric Dentistry and any and all employees and/or agents of David L. Goldstein DMD, Pediatric Dentistry the right and permission to use and/or publish photographs of me for art, promotional and educational purposes (including but not limited to, advertising, publicity, commercial or display of use).

Release of Claims:

I hereby release and discharge Pediatric Dentistry and all persons functioning under his/her permissions or authority from any legal or equitable claims including but not limited to the following: blurring of the image(s), alteration, distortion or use in composite form, libel, invasion of privacy or any claims based on the production or in the process of recording or publishing the materials.

Initial the following:

- Yes, you may use my photos
 No, please do not use my photos

Signature: _____ Date: _____