Personal Release Form General

I, for myself, child/children, my spouse, my legal representatives, heirs and assigns, hereby consent to allow Richard Solomon, MD, PLC, a Michigan professional limited liability company d/b/a The PLAY Project, its members, employees, agents and assigns to use and disseminate pictures and/or videos of my child/children, myself and/or family members for the following purposes (**please initial** each use where you grant permission, or initial the last item if approval is not granted):

\_\_\_\_\_ training seminars for professionals and students;

\_\_\_\_\_ community workshops attended by parents and professionals; aimed at introducing the community to autism and The PLAY Project intervention;

\_\_\_\_\_ sharing video/images on our website [www.playproject.org](http://www.playproject.org)

\_\_\_\_\_ sharing video/images on our social media channels, including but not limited to, The PLAY Project \_\_\_\_\_\_Facebook page, The PLAY Project YouTube channel, and The PLAY Project blog.

\_\_\_\_\_ **All the above** uses are approved.

\_\_\_\_\_ **None of the above** uses are approved.

*I understand that the people shown in the pictures and videotapes will not be disguised and will be identifiable.*

Personal Release Form PLAY Project Video Library

I, for myself, my child/children, my spouse, my legal representatives, heirs and assigns hereby consent to allow Richard Solomon, MC, PLC, a Michigan professional limited liability company, d/b/a the PLAY Project, its members, employees, agents and assigns to use and disseminate the pictures/ videos of my child, myself and/or my family members for a PLAY Project Video Library to support the training and fidelity of PLAY Project Consultants. I understand the use of these videos may be, also, used to show other PLAY Project families examples and techniques.

 I understand these videos can and will be accessed by PLAY Project Consultants and PLAY Project Consultants in training through a secure HIPPA compliant file sharing site. I understand that the people shown in the videotape will not be disguised and will be identifiable.

Please initial below

\_\_\_\_\_ **I agree with all of the above for the Personal Release form for a PLAY Project Video Library**.

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RELEASE AND HOLD HARMLESS

I, for myself, my child/children, my spouse, my legal representatives, heirs and assigns hereby waive and release Richard Solomon, MD, PLC, its members, employees, agents and assigns from any and all liabilities, causes of action, suits, claims, demands, damages of every kind whatsoever, including medical information, that I or we may have in the future arising out of the use and dissemination of the referenced pictures and videos for the purposes to which we have consented. This release includes medical information contained therein as defined under the Health Insurance Portability and Accountability Act of 1996 ("HIPPA") 426 USC 1320d and 45 CFR 160-168 and amended including the rules and regulations thereunder.

I further acknowledge and agree that Richard Solomon, MC, PLC is the owner of the photos, videos, and written documentation and by executing this consent, release and hold harmless agree for myself, my child/children, my spouse, legal representatives to indemnify and hold Richard Solomon, MD, PLC, its members, employees, agents and assigns harmless from any and all claims, costs, expenses, royalties, residuals, damages, liabilities of every kind arising out of or in connection with the consents and rights granted herein.

CONSENT

I acknowledge that I have read the above consents, release and indemnification prior to executing it and I am familiar with its contents. I voluntarily agree to and give permission to Richard Solomon, MD, PLC, its members, employees, agents and assigns for the use and dissemination of video footage, written documentation, and pictures of myself, my child and family for the above identified purposes.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Printed Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date