



*“Stronger Every Day”*

### **Patient Consent for Photograph/Video Use**

Photographs and/or short video recordings may be taken of patients when they “graduate” from physical therapy. These photos/videos will be used exclusively by McDonald Physical Therapy for marketing and promotional purposes and may be posted on our website, social media, and within our clinic.

I, \_\_\_\_\_, give permission to McDonald Physical Therapy to use photographs/video of me or my child (or person for whom I am legal guardian) in an appropriate manner within promotional material. I understand the image may be seen by members of the general public that visit the clinic, website, or social media post by McDonald Physical Therapy. I understand that my first name may be used, unless I specify otherwise, and that it is possible that someone may recognize me. By agreeing to these terms, I understand that I will not receive payment from any party.

Patient signature \_\_\_\_\_ Date \_\_\_\_\_

For patients under 18 years of age, a signature below indicates that the information in this consent form has been explained to them, and they give consent for McDonald Physical Therapy to use their photos/video as outlined above.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

[www.mcdonaldpt.com](http://www.mcdonaldpt.com)

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