



Social Media Consent Form

I hereby give Delaporte Veterinary Hospital permission to take photographs and/or videos of me and/or my pet(s) for the purpose of posting on Delaporte Veterinary Hospital's Facebook, hospital website, and other social media outlets.

I hereby release and discharge Delaporte Veterinary Hospital from any and all claims arising out of use of the photos. _____ (initial)

Delaporte Veterinary Hospital has my permission to use: (Initial all that apply)

- Only my pet's photo/video
- My pet's name
- Reason for hospital visit
- My name and/or family members' names

Pet's printed name(s) _____

Owner's printed name _____

_____ I DO NOT give consent for photos and/or videos of myself and/or my pets to be posted on any social media outlets

Print Name: _____

Signature: _____ Date _____

Office Use Only

- Updated Social Media Communication in Avimark for each pet _____ (initial) _____ (date)
- Scanned document and attached to Social Media Consent for each pet _____ (initial) _____ (date)