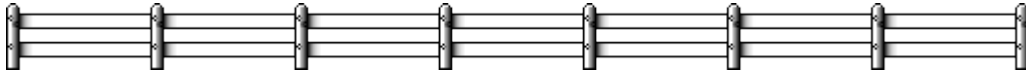


Gaitway Therapy LLC



7403 CR 101, Belle Center, Ohio 43310  
937-464-2017 phone; 937-464-2074 fax; 937-935-2594 cell

**PHOTO RELEASE FORM**

I \_\_\_\_\_ give permission for Gaitway Therapy to  
take and use still and moving photographs or videotape of our son/daughter/ward/self:

\_\_\_\_\_ .

In addition, I consent and authorize Gaitway Therapy LLC and its advertising agencies, the news media and any other person or organization interested in aspects of hippotherapy or therapeutic horseback riding to use and reproduce said photographs, films and pictures; and to circulate or publicize the same by any and all means, including but not limited to newspapers, magazines, television, brochures, pamphlets, website, instructional materials, books and clinical material.

No inducements or promises have been made to us/me to secure our/my signature(s) to this release other than the intention of Gaitway Therapy LLC to use said photographs, films and pictures for the primary purpose of promoting and aiding Gaitway Therapy LLC and its work.

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

Signature of Parent/Guardian: \_\_\_\_\_

Signature of Participant ( if over 18 years old ): \_\_\_\_\_