BOULDER SCHOOL OF MASSAGE THERAPY

Media Consent & Release Form (Photo, Video, Audio)

Provider/Presenter Name: _____

Event Name: _____

Event Date(s): _____

1. Consent to Capture and Use Media

I hereby grant permission to Boulder School of Massage Therapy ("BSMT"), its representatives, employees, contractors, and authorized media partners to photograph, video record, and/or audio record me during the above-referenced event.

2. Use of Media

I understand and agree that BSMT may use, reproduce, edit, publish, and distribute these recordings for lawful purposes, including but not limited to:

- Educational and training materials
- Accreditation and regulatory compliance documentation (including Colorado DPOS and COMTA requirements)
- Marketing, advertising, and promotional materials (print, digital, website, and social media)
- Public relations and community outreach
- Internal program evaluation and quality improvement

3. No Compensation

I understand that I will not receive compensation, royalties, or any other payment for the use of my likeness, voice, or appearance.

4. Release of Liability

I release and discharge BSMT and its agents from any and all claims, demands, or causes of action that I may have arising from or related to the use of such media, including claims for defamation, invasion of privacy, or right of publicity.

5. Confidentiality & Professional Boundaries

BSMT will make reasonable efforts to avoid capturing sensitive or confidential information, including client health information, in accordance with applicable privacy standards. However, I understand that participation in a public or semi-public educational event may involve incidental inclusion in media.

6. Optional Opt-Out

☐ I consent to internal educational and compliance use only (no public marketing)
☐ I do NOT consent to identifiable use of my image/voice (BSMT may still capture incidental, non-identifiable footage)

7. Duration of Consent

This authorization is valid indefinitely unless revoked in writing. Revocation will apply only to future uses and does not require BSMT to remove previously published materials.

8. Governing Law

This agreement shall be governed by the laws of the State of Colorado.

Provider/Presenter Information

Full Name (Print): _____

Signature: _____

Date: _____

Email: _____

BSMT Representative

Name/Title: _____

Signature: _____