Release Statement

Consent to usage of images on an internet website in a medical case study or as a "Before and After" example of a medical treatment or procedure.

I	whose signature appears below, do consent to the use		
(PRINT FULL NAME)			
of my images in photographs, illustrations, or other li	kelihoods, for the purpose of publication and display on the internet		
website(s)of Dr. Mark Melendez and or Cosmetic and Reconstructive Surgery Associates of Connecticut, PC (ORGANIZATION NAME) (ADDRESS)			
		The use of my images in photographs, illustrations, of	or other likelihoods is limited to
		Images, photographs, illustrations or other like	celihoods which show <u>ONLY</u> the following parts of my body:
NO IMAGE is to be used which will display o	r disclose my facial identity or any other identifying marks or features		
 Images, photographs, illustrations or other lil 	celihoods which SHOW or DISPLAY MY FACIAL IDENTITY or other		
identifying marks and/or features which may	therefore disclose MY PERSONAL IDENTITY.		
Furthermore, the use of my images, photographs, illu EXCLUSIVELY as a participating subject in the subject in t	ustrations or other likelihoods will be discussed or illustrated. The following Medical Case Study(s):		
■ EXCLUSIVELY as an example of "Before an	d After" results of the following medical treatment(s) or procedure(s):		
Signature	Date		
Address			
City, State, Zip			
Signature of Parent or Court-Appointed Guardian			
Date			