



Natural Abilities Assessment
By Kathy Kolbe

VIDEO AND PHOTO RELEASE

I, _____, hereby grant _____ & Dynamynd, Inc. permission to use, reproduce, and/or publish photographs and/or video that may pertain to my child including image, likeness and/or voice. My child's video(s), photograph(s) and/or testimonial(s) in whole or in part can be used by _____ and Dynamynd, Inc., with all rights for use assigned to them.

I understand that I will not receive any compensation, now or in the future, for the use of said photograph(s), video(s), or testimonial(s). I understand that this may be used by _____ and Dynamynd, Inc. for in-house and outside training and marketing purposes in electronic, print or new media formats.

Child Name

Parent Name

Parent Signature

Date