



# North Los Angeles County Regional Center

Main 818-778-1900 • Fax 818-756-6140 | 9200 Oakdale Avenue #100, Chatsworth, CA 91311 | [www.nlacrc.org](http://www.nlacrc.org)

## Authorization, Consent, and Release for Use of Name, Voice and Likeness

**Each person appearing in a video or photo being submitted to NLACRC (or if the person appearing in the video or photo is a minor, conservatee or ward, then such person’s parent, guardian or conservator) must complete and sign this form (“Authorization, Consent, and Release”).**

By signing below, I consent and agree that North Los Angeles County Regional Center ("NLACRC") and NLACRC’s affiliates, personnel, licensees, service providers and others whom NLACRC may select or authorize (“Authorized Parties”) may make any and all uses of the submitted photographs, videos, voice, names, likeness, images, and any other information identified in Table A of the Addendum to this Authorization, Consent, and Release (the “Submitted Content”) of \_\_\_\_\_  
**[insert name of the individual appearing in the video, photograph, voice recording for whom consent is being provided]** (the “Submitter”).

I consent and agree to the Submitted Content being used by NLACRC and the Authorized Parties, in any or all existing and future media, any number of times, on the NLACRC website, social media platforms and other platforms, forums and locations identified in Table B of the Addendum to this Authorization, Consent, and Release, for advertising, marketing, promotion, education, advocacy, and any other uses and purposes whatsoever, whether alone, in combination or together with other works; original or altered form, or otherwise, anywhere.

I acknowledge the Submitted Content, including the likeness, voice, and name of the Submitter, may be used, published and copied by NLACRC and/or the Authorized Parties, for illustration, publicity, advertising, marketing and promotion of events, services, or products. The purpose of the use of the Submitted Content is for advertising, marketing, promotion, education, advocacy, and any other uses and purposes whatsoever.

I further consent to the appearance and use of the Submitter’s name in connection with the Submitted Content; but the use of the name is not required.

I release and discharge NLACRC and the Authorized Parties referenced above, and their assigns and designees (including any agency, client, or provider) from any and all claims and demands arising out of or in connection with the use of the Submitted Content and the Submitter’s name, including, but not limited to, claims for defamation, invasion of privacy or rights of publicity. I understand and acknowledge that the Submitted Content and any information used by NLACRC or the Authorized Parties may be used or published by third parties beyond the control of NLACRC which are



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not parties to this Authorization, Consent, and Release. NLACRC and the Authorized Parties have no control over the acts of third parties and are not responsible for any unauthorized acts of publication or use by third parties.

I acknowledge that: (1) the NLACRC is not required to use and/or post the Submitted Content; (2) the NLACRC will have sole discretion to decide whether to use or post the Submitted Content and how to use or post the Submitted Content; (3) if the Submitted Content is used, the Submitter will not be entitled to any compensation for the uses identified above, regardless of benefit to others arising from such uses; and (4) any information, including personal health information or other information used pursuant to this Authorization, Consent, and Release may be subject to re-disclosure by third-parties, and that the disclosed information may no longer be protected by applicable Federal and State privacy laws.

I acknowledge that NLACRC will rely on this Authorization, Consent, and Release and is entitled to use the information authorized under it. NLACRC advised me to read this instrument carefully and to sign only if I am willing to grant NLACRC the rights indicated above in the Submitted Content. I acknowledge that I am over the age of 18 and that if I am the conservator, guardian, parent, or other authorized representative of the Submitter, that I have the legal right to provide consent on behalf of the Submitter. This consent is valid and cannot be modified or withdrawn, except in a writing signed by me or another qualified individual on my behalf, and the withdrawal or modification must be sent by certified mail to NLACRC, 9200 Oakdale Avenue #100, Chatsworth, CA 91311, to the attention of the Public Information Specialist. In the event of a withdrawal or modification, I understand that NLACRC will not be able to control information disclosed pursuant to the Authorization, Consent, and Release prior to communication to NLACRC of the withdrawal or modification. I understand that if I revoke this authorization, the revocation will not apply to information and Disclosed Content that has already been used or disclosed in reliance of my authorization.

I have read this Authorization, Consent, and Release and the Addendum to this Authorization, Consent, and Release. I understand that treatment, payment, enrollment, or eligibility for benefits is not conditioned on my signature of this authorization.

Signed: \_\_\_\_\_ Printed name: \_\_\_\_\_

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



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## Addendum to Authorization, Consent, and Release for Use of Name, Voice and Likeness

Table A

- Name
- Date of birth
- Date of Service
- Discharge Dates
- Telephone, cellphone, and fax numbers
- Diagnoses
- Treatments
- Medications
- Medical Treatment Providers
- Test Results
- Treatment Plans
- Email addresses
- IP addresses
- Social Security numbers
- Medical record numbers
- Health plan beneficiary numbers
- Device identifiers and serial numbers
- Certificate/license numbers
- Account numbers
- Website URLs
- Full face photos and comparable images
- Biometric identifiers
- Any unique identifying numbers, characteristics or codes



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## Addendum to Authorization, Consent, and Release for Use of Name, Voice and Likeness

### Table B

- Academia
- Care2
- CaringBridge
- Facebook
- Flickr
- Instagram
- LinkedIn
- MyHeritage
- Myspace
- Nextdoor
- Periscope
- Pinterest
- Reddit
- Skype
- Snapchat
- TikTok
- Tumblr
- Twitter
- WhatsApp
- Yelp
- YouTube