



### Website and Social Media Release Form

I, the undersigned, do hereby grant permission to Primary Pediatrics, P.C. to post my and/or child's story, photo or other item, hereinafter referred to as "Materials", I submit to and for Primary Pediatrics website and Facebook account. I acknowledge that my child is under 18 years old and lacks the legal capacity to enter into binding agreements.

I hereby release Primary Pediatrics, P.C. from all claims and demands arising out of or about any use of said "Materials", including, without limitation, all claims for invasion of privacy, infringement of my right of publicity, defamation and any other personal and/or property rights. I acknowledge and agree that no sums whatsoever will be due to me because of the use and/or exploitation of the "Material" or any rights therein.

Accordingly, I have read this Release and consent to my child's inclusion in the "Materials" will no contest the rights granted in this Release.

Primary Pediatrics reserves the right to refuse any pictures that are deemed not appropriate for our website or social media page.

Child's Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Parent or Legal Guardian Signature

Please make a copy of this form for your own records and email or mail the signed original to:

**Primary Pediatrics, P.C.**  
550 Professional Dr.  
Macon, GA 31201

Photos@primarypediatrics.com