

## **Testimonial Release Consent**

**Purpose of Consent:** By signing this form, you are hereby consenting to allow **MST SERVICES, LLC** to use content related to your experiences. (Quotes, testimonials, information, subject matter, etc.)

\*Note: Names will be changed, and NO personal information of any kind will be shared about you or others involved.

**Right to Revoke:** You have the right to revoke this Release at any time by providing written notice of your revocation and submitting it to the Contact Person listed below. Please understand that revocation of this Release will not affect any action **MST Services, LLC** took in reliance on this Release before receiving your revocation.

- MST Services Marketing Team

## **CONSENT TO RELEASE**

I hereby authorize **MST Services, LLC** and staff to use my testimonial and any information contained herein in its public relations efforts. I understand and approve the disclosure of testimonial information to the media and other individuals and entities that may be involved in the public relations efforts of **MST Services, LLC**.

I understand that I am providing information to **MST Services, LLC** and that my treating healthcare provider will not be providing any protected information to the media or the public, including private health information in my medical records, the confidentiality of which may be protected by federal and state statutes and regulations, including the Health Insurance Portability and Accountability Act (HIPAA).

I waive the right of prior approval and hereby release **MST Services, LLC** from any and all claims for damages of any kind based on the use of my testimonial or information I have provided. By signing below, I agree and acknowledge that I have read and understood the above Release and agree to all terms described. I am of legal age and freely sign this Consent to Release my Testimonial.

---

Signature

---

Date

---

Print Name

**Please provide your contact information:**

---

Address

---

Phone

---

Email