



AUTHORIZATION FOR USE AND DISCLOSURE OF INFORMATION FOR MARKETING PURPOSES

I, \_\_\_\_\_, hereby authorize The SCOOTER Store to use and/or disclose words attributable to me, including my name or other personal information, photographic portraits, pictures, video tapes, sound and sound recordings, including still, single, multiple or moving, and in which I may be included in whole or in part, made through any media (collectively, “Materials”), in connection with The SCOOTER Store’s marketing and advertising activities, which will include disclosure to the general public.

I understand that this authorization is voluntary, and that The SCOOTER Store will not condition treatment or payment for my health care services on my completion and signing of this Authorization. I understand that I will not receive any financial or in-kind compensation in exchange for the use of the Materials.

I understand that, as described below, I have the right to revoke this Authorization at any time; however, I understand that my revocation will not affect any actions that The SCOOTER Store takes in reliance on my authorization before it receives my revocation. Some of the actions The SCOOTER Store may take in reliance on my authorization include, but are not limited to, the following:

- Publishing the Materials in radio, television or printed advertisements.
- Including the Materials in printed marketing materials such as catalogs, brochures, and direct mail pieces.
- Incorporating the Materials in electronic advertising and marketing materials.

This Authorization will expire upon revocation by you.

**Rights Concerning this Authorization.**

By my signature below, I certify that I have read and I understand the following rights:

- (1) I may revoke this Authorization at any time by notifying The SCOOTER Store, ATTN: Privacy Officer, PO Box 310709, New Braunfels, TX 78131. I understand that my revocation will not affect any actions The SCOOTER Store took before it received my revocation, including the airing of commercials once the taping for such commercial has been completed, or the use of printed materials once the information has been sent to the printer.
- (2) I may see and receive a copy of this Authorization if I ask for it.
- (3) I am not required to sign this Authorization in order to be eligible for treatment or other services or benefits from The SCOOTER Store.
- (4) I have been made aware of The SCOOTER Store's "Notice of Privacy Practices".
- (5) The Materials used or disclosed under this Authorization may be re-disclosed by the recipient(s) and may no longer be protected by federal privacy laws after re-disclosure.

\*\* Printed Name: \_\_\_\_\_

\*\* Signature: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_

\*\* If you are signing as a personal representative of another person, you must provide a description of your authority to act for the other person (for example, a power of attorney), and a copy of the document that authorizes you to act as the personal representative, if any.