

Consent to Photograph, Video Tape or Audio Record

Date: April 11, 2024

Location of photo shoot, videotaping and/or audio recording: <u>Providence St. Vincent Medical</u> Center (Portland, OR)

Intended usage: Providence Health System internal and external use including potential media television, radio and print outlets.

Project coordinator: Providence Ready Career Exploration
I hereby authorize Providence Health System (PHS) or people working on behalf of PHS to

photograph, video tape and /or audio record me and to use my name and these photographs, video tapes and/or audio recordings in commercial and/or non-commercial marketing materials, patient education materials, print publications, public relations, broadcast media, video productions and Internet communications.

I waive all rights to compensation and claims that I may have or acquire against Providence Health System for use of the information authorized by this document.