



# PHOTO AND TESTIMONIAL WAIVER

Email to [success@lifewave.com](mailto:success@lifewave.com)

Product Name (Required): Alavida Trio

Date submitted: \_\_\_/\_\_\_/\_\_\_\_\_

How long have you used product? \_\_\_\_\_ days/weeks/months

I grant to LifeWave Inc., its representatives and employees, the right to use my name and likeness in connection with the above-identified subject. I authorize LifeWave Inc., its assigns and transferees, to use and publish my name and likeness for promotional purposes. I understand I waive any right to royalties or other compensation arising or related to the use of the photograph.

I willingly and truthfully gave a testimonial on a LifeWave product after having used the product specified above and permit LifeWave to use this for promotional purposes.

I have read this release before signing below and I fully understand the contents, meaning, and impact of this release. If I no longer wish to allow my testimonial, name or photograph to be used for any reason, I must call LifeWave Customer Service and request this. The request will be considered complete, upon receiving notification from LifeWave that the testimonial has been removed. LifeWave must be able to contact you directly if there are any questions regarding your testimonial and may also contact you for follow-up on your satisfaction with LifeWave products.

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

\_\_\_\_\_  
\*Printed name

\_\_\_\_\_  
Organization Name (if applicable)

\_\_\_\_\_  
\*E-mail Address

\_\_\_\_\_  
\*Phone Number

\_\_\_\_\_  
\*Mailing Address

\_\_\_\_\_  
City State/Province Postal Code Country

*LifeWave must be able to contact you directly if there are any questions regarding your testimonial and may also contact you for follow-up on your satisfaction with LifeWave products.*

\*Required Field