



VICTORY FOR VETS INC VETERAN DOG PROGRAM AUTHORIZATION FORM

I, \_\_\_\_\_ give my permission for Victory For Vets Inc. to share my story and progress through the Veteran Dog Program on their website, social media sites, newsletters, marketing materials and events.

Notes: Please note any exceptions/conditions of this release form. Our goal is to be able to share our Veteran's stories with our supporters on our website, social media pages, marketing materials and at events. We strive to do this while also respecting your privacy/needs.

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

Print Name: \_\_\_\_\_

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