

**IDEAL BODY CENTER
AUTHORIZATION & CONSENT**

BY: _____ (hereinafter referred to as the "DIETER")

IN FAVOUR OF: IDEAL BODY CENTER _____ (the "CLINIC") and IDEAL PROTEIN OF AMERICA, INC. ("IPA") and LABORATOIRES C.O.P. INC. ("COP")

The Dieter hereby acknowledges and agrees that it has followed the Ideal Protein Weight Loss Method and protocol and used "Ideal Protein" products in connection therewith under the supervision of the Clinic. The Dieter hereby irrevocably authorizes **IDEAL BODY CENTER**, IPA and COP to use the Dieter's photos, images, testimonials and/or story in connection with the promotion and sale of the "Ideal Protein" weight loss and wellness method and protocol as well as "Ideal Protein" products. This authorization is granted in perpetuity and does not entitle the Dieter to any form of remuneration or compensation.

Signed in _____ , **on this day of** _____ , **20** _____
(city/town)

The Dieter _____