



***A-do-ré-me* Music Camp**
August 14-17
2008 Release Form

To be completed by Parent(s) or Guardian(s)

I, the undersigned, individually and as Parent(s) and Guardian(s) of

(Student's Name), ask that he/she be admitted to participate in ***FCSN A-do-re-me Music Camp 2008***. In consideration of such admission, I/we do hereby agree to release, discharge, and hold harmless FCSN, its officers, agents, and employees of and from all causes, liabilities, damages, claims, or demands whatsoever on account of any injury or accident involving the said student and/or his/her instrument(s) arising out of the student's attendance at the ***FCSN A-do-re-me Music Camp 2008*** or in the course of activities held in connection with the camp. Additionally, I/we authorize ***FCSN*** to photograph, videotape, and/or audiotape the student in promotion of future ***FCSN A-do-re-me Music Camps***.

Both signatures requested:

Mother's/guardian's signature

Father's/guardian's signature

Parent(s) / Guardian(s) are not required but **are strongly encouraged** to stay with the student to maximize benefit of the camp.

If the student will be dropped off and picked up by someone other than the parent (s) / guardian (s), please fill out the following information. (Student will not be released to anyone not designated by parent/guardian.)

Name of person(s) who will be dropping off and picking up student each day:

Name

Phone Number

Relationship to student