
Parent/Guardian permission form

For:

Stageworks Theatre Parent/Guardian Permission Form

Section I: I give my child permission to participate in Stageworks Theatre activities.

Section II: Stageworks Theatre requires that each student's parents or guardians understand and accept its policies on the following issues. Please read the policies listed below and sign your name below to indicate your understanding and acceptance of these policies.

Discipline Policy - A student's disregard of the Stageworks program rules will result in a temporary or permanent suspension from its program. If the student's behavior is consistently unacceptable, Stageworks reserves the right to dismiss the student from the program permanently.

Special Needs - Prior to returning this form, any special behavioral, physical, emotional, psychological or medical needs of the student should be clearly discussed with Stageworks' Administrative Director by the parent or guardian.

Permission for Medical Treatment - In the event of an emergency in which the parent/ guardian cannot be contacted, emergency medical staff and the Stageworks staff/volunteers may take appropriate action as needed for the student.

Photographs Waiver - By signing this form, you give permission to Stageworks to use photographs, videotapes, film, and audiotapes in which your student appears as a participant in the Stageworks Theatre for education and publicity/promotional purposes for or related to the Stageworks. These can also be used by Stageworks in published materials.

General Release of Liability - The undersigned agrees to release, waive, discharge, and hold harmless Stageworks, its directors, officers, employees, agents, and volunteers from any and all claims, suits, losses, or related causes of action for damages, including but not limited to such claims that may result from any negligence of anyone, for any injury or death, illness, accident or any loss or damage to personal property or otherwise, during or arising in any way from participation in the Stageworks Theatre.

I ACKNOWLEDGE THAT THIS GENERAL RELEASE OF LIABILITY OF STAGEWORKS THEATRE IS BINDING ON ME PERSONALLY AND ON MY HEIRS, PERSONAL REPRESENTATIVES, SUCCESSORS, AND ASSIGNS.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE STAGEWORKS THEATRE PARENT/GUARDIAN PERMISSION FORM.

I UNDERSTAND AND AGREE TO THE POLICIES AS STATED ABOVE

I understand and agree to the policies as stated above.

Signature _____

Date _____