2017-2018 Season Release Form

I give The Continuo Arts Foundation permission to publish in print, electronic, or video format my likeness or image of my child. I release all claims against the Continuo Arts Foundation with respect to copyright ownership and publication including any claim for compensation related to use of the materials.

Singers Name: _____

Parent Name: _____
(Parent or Guardian, Please print)

SIGNATURE: _____ DATE: _____

General Guidelines: It is recommended that a release be obtained when photographing or videotaping a minor (under 18). Parent or guardian signatures are required; signatures of minors are not sufficient. When images are published, the Continuo Arts Foundation will take cautionary steps to provide minimum identifying information and will not use specific street or mailing addresses, e-mail addresses, or phone numbers. Signed release forms are not needed when subjects are in public places, such as parks. If you have questions, please contact The Continuo Arts Foundation at 908-264-5324

Liability Waiver

I hereby release and discharge the Continuo Arts Foundation, Inc., and its officers, employees, agents and contractors from all actions, claims, or demands that I, my heirs, guardians, and legal representatives now have, or may have in the future, for injury or damage resulting from my participation with the Continuo Arts Foundation.

I have carefully read this agreement and fully understand its contents. I am aware that this is a release of liability, and sign it of my own free will.

SIGNATURE (If over 18): _____ DATE: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

Attendance Policy – Performance Ensembles

In order to maintain the high standards of the Continuo Arts Ensembles, singers must attend all rehearsals and performances.

- **Excused Absences**: Illness, Scheduled School Conflict (document required), Out-of-Town, Family Event.
- **Advance notice is required via phone, email or database**
- **All Children & Youth Choir absences must be made up**
- **Two or more absences without advance notice, or two or more consecutive absences may impact participation in scheduled activities.**

I have read and understood the Attendance Policy, and agree to the terms.

SINGER'S SIGNATURE: _____ DATE: _____

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____