



Participation, Release, and Consent Form

1345 South Burlington Avenue
Los Angeles, CA 90006
Ph: 213.382.6378 FAX 213.383.0523

Permission the Participate

I, the undersigned, consent to my child's participation in the Angelica Center for Arts and Music program. I agree to hold Angelica Center for Arts and Music harmless against any liability, loss, or expense in traveling to and from classes and program events. I understand that, as with any activity, there are risks to my child. I, therefore, agree to assume these risks and to hold Angelica Center for Arts and Music harmless from any action or actions, suit or suits, in law or equity, which may be brought by any person or persons in connection with, or with reference to, the administration, planning, preparation, development, conduct, and execution of Angelica Center for Arts and Music's programs. I understand that my child will participate in Angelica Center for Arts and Music's education program from the date of this Agreement until withdrawn.

Medical Consent

I understand that there are some risks inherent in the activities that are included in the Angelica Center for Arts and Music's program, but willingly assume these risks in order to allow my child to participate. If I cannot be reached in the event of an emergency, I give permission for any care or treatment by a physician, surgeon, hospital, nurse, doctor's assistant or medical care facility that may be required.

Photography/Video Taping

I fully understand that my child might be in contact with the press at recitals, performances, or fundraising events. Also, it may be necessary for program staff to photograph or video tape Angelica Center for Arts and Music students to advertise its program or for other purposes. I give permission for program staff to photograph or video tape my child and to use such photographs or video tapes for promotional or other use by Angelica Center for Arts and Music.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE INFORMATION, AND AGREE TO ASSUME ALL RISKS.

Name of participant (Please print)

Signature of Parent or Guardian

Date

NOTICE OF NONDISCRIMINATORY POLICY AS TO STUDENTS - Angelica Center for Arts and Music does not discriminate on the basis of race, color, gender, religion or national and ethnic origin.