



Consents and Agreements

Students Name _____ Male _____ Female _____

School _____ Grade _____ Age _____ Date of Birth _____

Transportation I hereby grant permission, as a parent or legal guardian, to the agents and instructors of Lackawanna County's ARTS Engage! program to transport my child to program and field trips when necessary and requested. I also grant them permission to transport my child to a hospital for emergency treatment in the event that he/she becomes injured or ill and needs medical attention.

Parent/Guardian (please printed name) _____ Date _____

Parent/Guardian signature _____ Date _____

Photo/Video Release In consideration of my son/daughter's engagement as a photo or video subject by Lackawanna County's ARTS Engage! program, I hereby grant the right and permission to copyright, use, reuse, and publish photographs or videotape images of my son/daughter for the ARTS Engage! program's purposes, including use in advertisement for publications and development purposes.

Parent/Guardian (please printed name) _____ Date _____

Parent/Guardian signature _____ Date _____

Rules/Regulations I agree to abide by all program regulations while attending my designated Arts Engage! program. I understand that the possession or use of alcoholic beverages, unauthorized drugs or a weapon of any kind is grounds for immediate expulsion from the program. I also understand that disruptive behavior is grounds for immediate dismissal. I also understand that the ARTS Engage! program is not responsible for any lost or stolen articles.

Parent/Guardian (please printed name) _____ Date _____

Parent/Guardian signature _____ Date _____

Liability As a parent/guardian of a participant of the ARTS Engage! program, I understand that this program does not provide any medical insurance coverage for the accidental injuries or illness or coverage for accidental injuries or illness or personal property damage. I agree by my signature below, to release and hold harmless, Arts Engage program from any and all responsibility or liability for any injuries or damages not directly caused by negligence of the program, its officers, agents or employees.

Parent/Guardian (please printed name) _____ Date _____

Parent/Guardian signature _____ Date _____

