

The Philadelphia Classical Guitar Society 2038 Sansom St. – Philadelphia 19103 PA www.phillyguitar.org

Philadelphia Classical Guitar Concert Ensemble

PARENTAL/LEGAL GUARDIAN CONSENT AND RELEASE FORM

I, the undersigned (First and Last name of parent/guardian)	, am
the parent or legal guardian of the child/youth named (First and Last Name of child) who was born on (date of birth) address)	
For any situation, I assure that I will be available for the phone call at(phone number)	
As a parent or legal guardian,	
 I affirm that I have been completely informed all the Philadelphia Class Concert Ensemble activities that the child/youth will participate. I understand the general structure of the activities and do not need to each and every activity. I have registered the child to participate in the PCGS's Concert Ensemble for my child to be admitted to these activities. I hereby voluntarily release, forever discharge the community, PCGS, idirectors, employees, contractors, volunteer and agents from any and demands, or causes of action, which are connected with my child's paprograms or the use of the equipment and facilities. I agree to pay for any and all medical expenses incurred and give pernodoctor or health care professional to provide medical care if necessary 	be informed of ble activities. activities in person its officers, I all claims, rticipation in the
The information I've given in this form is complete and accurate. By signing that I have fully informed myself of the contents of this Parental Consent and reading it before I signed it.	
I warrant that I possess all the rights, powers, and privileges of a parent or leg necessary to execute this document with binding legal effect.	gal guardian
PARENT/GUARDIAN SIGNATURE	DATE