

# Westminster *Sing!* Choir Camp Registration

## PLEASE READ CAREFULLY AND SIGN:

By signing below; YOU as the parent/guardian accept that as a participant in the camp the risk of injury is possible. YOU as the parent accept that your child **must** strictly follow and adhere to all camp staff expectations and directives for purposes of safety. Failure to comply with camp rules may increase the likelihood that your child could become injured and possibly injure others. We strive to provide a safe, encouraging, and fun learning experience. Reckless behavior will simply not be tolerated. YOU as the parent/guardian waive all liability against any and all employees, officials and staff associated with Westminster Presbyterian Church and the camp.

PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

## VIDEO/PHOTOGRAPHY RELEASE

To Whom It May Concern:

I, \_\_\_\_\_ (the undersigned) do hereby confirm the consent heretofore given you with respect to your photographing or videotaping me or my child/children in connection with the Westminster Presbyterian Church, Sing! Choir Camp Program.

And I hereby grant to you, your successor, assigns and licenses the perpetual right to use, as you may desire, all photographs, motion pictures and soundtrack recordings which you may make of me or my child/children, and the right to use my name and/or child(ren)'s name or likeness in or in connection with the exhibition or any other use of such photograph or video.

I release the Westminster Presbyterian Church from any expectation of confidentiality for the undersigned minor child/children and attest that I am the parent or legal guardian of the child/children listed below and that I have the authority to authorize the use of their participation in the video.

As these videos and/or pictures are completely voluntary, and I will receive no financial compensation now or in the future, I release the Westminster Presbyterian Church and its employees from liability for any claims by me or any third party in connection with my participation.

I have read and understand the above.

PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Relationship to minor(s) \_\_\_\_\_

## Name & Age of Minor Child

Name \_\_\_\_\_ Age \_\_\_\_\_ DOB \_\_\_\_\_