

**NORTHERN CALIFORNIA FLUTE CAMP
PARENTAL RELEASE AND AGREEMENT FORM**

Name of student _____

Age _____ Date of birth _____

Address _____ City _____

State _____ Zip Code _____

Home Telephone _____ email: _____

Cell # _____

Name of Parent(s) or Guardian(s) _____

I/we have freely provided the above information. I/we send the above ascribed child, a legal minor, to Hidden Valley Music Seminars from July 7th – July 15th, 2017 to attend Northern California Flute Camp.

I/we agree to have our child participate in the Northern California Flute Camp program in full, and that our child will reside at Hidden Valley Music Seminars during the entire camp session. I/we understand that no refunds are issued for early dismissal or early departure. I/we understand that special circumstances requiring a student to miss any portion of the NCFC session must be approved by the camp Director prior to camp. I/we have read the “General Information” sheet provided and agree to adhere to all of Northern California Flute Camp’s policies and regulations.

I give my permission for my child to be photographed or videoed for the purpose of publicizing the NCFC program. I fully relinquish my right or interest in any film, tape, or photograph which may be used for any legitimate purpose.

Parent Signature _____ Date _____

Student Signature _____ Date _____