



PARENTAL CONSENT FORM

PERMISSION TO PARTICIPATE

_____ (name of student) is given permission to attend and participant in Colt Cadets events and activities.

I agree to the following:

RESPONSIBILITY TO RETURN CORPS ISSUED EQUIPMENT

I agree to take responsibility for the safe return of all instruments/equipment loaned out to my student by the Colt Cadets Drum & Bugle Corps.

PHOTO RELEASE

I grant the Colts permission to take, use, and publish images, photographs, video, or sound recordings of my student for promotion, advertising, publicity, or other purpose.

PERMISSION FOR EMERGENCY CARE & CONVEYANCE

In the event my child should require medical attention, I grant permission for Colts or Colt Cadets staff or emergency medical services to handle emergency care decisions. I understand medical costs that could occur from such conveyance and subsequent treatment are the responsibility of the parent/guardian.

Please note any physical or medical conditions we should be aware of:

(examples: Diabetic; asthmatic; Tylenol allergy; food allergies etc.) _____

Parent Name (Printed): _____

Parent Signature: _____ Date: _____

Emergency Phone Number: _____