

FILMED ACADEMY OF THE ART

4533 MacArthur Blvd #240, Newport Beach CA 92660

STUDENT PARTICIPATION IN VOLUNTARY FILM FESTIVAL

PARENTAL PERMISSION AUTHORIZATION

_____ has permission to participate in the following film festival:

48 hour FILM FESTIVAL

DATE: 4pm: March 2, 2018 – 4pm: March 4, 2018

I understand that all school rules and regulations apply and that failure to abide by these guidelines may result in further disciplinary action to include dismissal from the program.

Student's Signature

Date: _____

Release and Covenant Not to File a Claim

I/We the undersigned, for himself and personal representatives, assigns, heirs, and next of kin, as well as for any minor for whom this "Release and Covenant Not to File a Claim" is executed, or that minor's personal representative, assigns, heirs and next of kin; hereby RELEASES, WAIVES, DISCHARGES, AND COVENANTS NOT TO FILE A CLAIM against FilmEd Academy of the Arts, its agents or employees, or the State of California for any injury, accident, illness or death occurring during or by any reason of the film festival that is the subject of this authorization.

The undersigned acknowledges that the film festival addressed by this release is completely VOLUNTARY. Attendance is not required by FilmEd Academy of the Arts or any of its agents or employees. I fully understand that participants are to abide by all school rules and regulations governing conduct during the film festival.

Parent/Guardian Signature
Home Phone: (____) _____

Parent/Guardian Print Name
Work Phone (____) _____

Student's Signature if 18 or over, or if emancipated minor

Student's Date of Birth: _____

If Parent/Gardian is not available, please notify:

Name: _____
Home Phone: (____) _____

Relationship: _____
Work Phone: (____) _____