



# DOUGLAS COUNTY YOUTH ORCHESTRA

## MEDIA RELEASE (UNDER 18)

I hereby consent to the photographing of my minor child or children and the recording of my child(ren)'s voice(s) and/or instrument(s) and the use of these photographs and/or recordings singularly or in conjunction with other photographs and/or recordings for advertising and publicity, for both internet and physical media. I understand that the term "photograph" as used herein encompasses both still photographs and motion pictures.

I hereby release Umpqua Symphony Association, and any of its associates or affiliates, and appointed advertising agencies, their directors, officers, employees, volunteers or agents from all claims of every kind on account of such use.

I am the parent/legal guardian of the individual child or children listed below.

1.

2.

3.

4.

5.

Please select one of the following options

I have read this release and **approve** of its terms

I have read this release and **refuse** my child(ren)'s participation in any way

I have read this release and allow my child(ren)'s participation, but with these **conditions**:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name



# DOUGLAS COUNTY YOUTH ORCHESTRA

## LIABILITY RELEASE (UNDER 18)

In consideration of the right to participate in Douglas County Youth Orchestra (DCYO) and Umpqua Symphony Association (USA) activities, I release any and all claims for damages, injuries and losses, including but not limited to personally owned musical instruments, and damages, injuries and losses suffered by my minor child or children against Umpqua Symphony Association and Douglas County Youth Orchestra and any directors, officers, employees, volunteers or agents thereof. I further understand that there are certain risks inherent in this activity, and I hereby agree to assume those risks on behalf of my minor child(ren) and to hold harmless Umpqua Symphony Association and its agents.

I am the parent/legal guardian of the individual child or children listed below and have read, understand and agree to the above.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name