



THE MASSACHUSETTS
EDUCATIONAL
THEATER GUILD, INC.

NOTE:

1. Student will not be permitted to participate if this form contains incomplete information and/or appropriate signature is missing.
2. Use a separate form for each student.

MEDICAL CONSENT & LIABILITY RELEASE

Print name of son/daughter

Print Student's E-mail Address

Print Name of school

Year of Graduation

Home Address

City

State

Zip

Parent Home Phone

Parent Cell Phone

Date

I hereby give my consent to the Massachusetts Educational Theater Guild to secure such medical attention as my above-named son/daughter may require during his/her participation in the Massachusetts Middle School Drama Festival, including the transfer of my child to a nearby hospital and the administration of emergency treatment as may be deemed necessary by medical personnel. I have listed below information concerning health insurance coverage, medications my child is taking, known allergies, and existing medical conditions. I have also provided accurate emergency contact information.

Health Care/Insurance Co. _____

_____ I do not have medical insurance.

List any medications student is currently taking: _____

List known allergies: _____

Describe existing medical conditions: _____

Primary contact person in case of medical emergency

Phone

Relation to student

Backup contact person in case of medical emergency

Phone

Relation to student

In connection with the participation of the above-named student, I/we agree to assume all risks incidental to the event and agree to exonerate, indemnify, and hold harmless the Massachusetts Educational Theater Guild, Inc., including its officers, directors supervising staff members, volunteers, and any of its agents assisting in the carrying out of said event, from and against any and all liability, loss, damage, injury, costs, claims, demands, and/or causes of action arising out of or related to the event or any related activities, the participation of individuals in the event or any related activities, or conditions created thereby.

Signature of parent/guardian

Date

Privacy Notice: METG, Inc. respects your right to privacy and asserts that it will not sell, distribute, or make public any information contained on this form. This form will be destroyed following the final festival performance.