

CONSENT FOR EMERGENCY MEDICAL TREATMENT

I, _____, the _____ of
(Parent or Guardian / Please Print) (Relationship / Please Print)

_____, hereby consent to and authorize the performance of
(Name of Student / Please Print)

treatment deemed advisable by the appropriate medical personnel in attendance, including but not limited to diagnostic tests, surgery, and administration of anesthetics. If emergency treatment is required, I authorize the Director in charge of this trip to act on my behalf to secure the most accessible medical services.

Date

Signature of Parent / Guardian

I, _____, hereby consent to and authorize the
(Name of Student / Please Print)

performance of treatment deemed advisable by the appropriate medical personnel in attendance, including but not limited to diagnostic tests, surgery, and administration of anesthetics. If emergency treatment is required, I authorize the Director in charge of this trip to act on my behalf to secure the most accessible medical services.

Date

Signature of Student

DEVON PREPARATORY SCHOOL

Devon, PA 19333

The Election

AGREEMENT and RELEASE

I, the undersigned, the parent of _____ (Student)

Student's Name

agree to allow Student to participate in *The Election* as a member of the cast or crew at Devon Preparatory School 363 N. Valley Forge Road, Devon, PA 19333.

We understand and agree that if in the judgment of the show supervisors the student endangers him/herself or any other participant, or engages in any activity that otherwise presents a problem, he/she may be asked not to return for any remaining performances, his/her parents will notified and so may his/her principal.

We understand and agree that the Student's possession or use of alcohol, or the Student's possession or use of drugs other than the medications set forth on the Medication and Health Information Form will result in show supervisors notifying the civil authorities and his/her school principal.

The undersigned on our behalf and on behalf of my/our heirs, assigns, personal representatives and next of kin, HEREBY RELEASE Show Supervisors, Devon Preparatory School, Administration and the Piarist Fathers ("Releasees"), with respect to any and all injury, disability, death, loss or damage to person or property incident to the performance and associated activities, whether arising from the negligence of the Releasees or otherwise, to the fullest extent permitted by law.

Date

Signature of Parent / Guardian

Date

Signature of Student

GIRLS ONLY

STUDENT RELEASE AND LICENSE AGREEMENT

STUDENT'S NAME _____

I, the undersigned, am the parent, legal or natural guardian of the minor above mentioned (herein Student).

I understand that Devon Preparatory School (herein Devon Prep) requires the Execution of this Agreement as a part of the consideration for having the Student participate in Devon Prep's fall drama in any capacity (cast, stage crew, house staff).

I understand that this agreement remains in effect for the entire time the Student is involved in Devon Prep's fall drama.

Devon Prep without payment of compensation, shall have at any time the right to use, publish, republish, adapt, and publicly display, in any media, now or hereafter known, the likeness of the Student, and/or any and all creations, compositions, literary, or artistic works, produced by the Student, for illustration, promotion, art, advertising, trade, or any other purpose whatsoever and to use the Student's name in conjunction therewith. Without limiting the generality of the foregoing, this Agreement shall specifically apply to all publications produced or sponsored by Devon Prep, including, but not limited to, the yearbook, the newspaper, our webpage, the literary magazine, art display(s) and show(s) or musical presentations.

IN WITNESS WHEREOF, I have signed this Agreement on the date set forth below, intending to be legally bound.

Date Signed: _____

Signature: _____