



Release Form

Emergency Medical and Liability Release

I understand and agree to all of the following: If my child appears to be ill or injured, I authorize (but do not require) the staff of Mid-South Music Institute, Inc. (MMI) to seek medical attention. MMI and its staff have no medical expertise, have no obligation to provide or not provide medical care, have no obligation to contact me/us prior to seeking medical attention but may endeavor to do so. I/we agree that I am/we are solely responsible for costs of any medical care provided and that MMI is not responsible. I/we further agree to release, hold harmless and indemnify MMI, its employees, volunteers, officers and directors from any liability whatsoever for any injuries, accidents, the results of the provision or the failure to provide medical treatment or for any other matter whatsoever. I understand that children are accident prone regardless of the care given.

Date Signed _____ Parent/Guardian _____

Student Name: _____	Age: _____
Parent Name _____	Phone: _____
Parent Name _____	Phone: _____
Physician _____	Telephone Number _____
Insurance Carrier _____	ID/Group/Policy # _____

Please list any special health problems, allergies, and learning disabilities:

Please list any medications being taken:

Emergency Notification Contacts if Parents Cannot Be Reached. (Please list two)

_____	_____
Name and Telephone Number	Name and Telephone Number

Media Waiver

I/we agree that Mid-South Music Institute, Inc. (MMI) may use the name, image, photographs, pictures, video and audio recordings, etc. of my child for any purpose related to the programs of MMI without compensation. Any copyrights related thereto shall be the property of the MidSouth Music Institute, Inc. I understand that photographs, audio and video recordings, etc. of my child may be placed on the website of MMI and/or published in news and other media.

Date Signed _____ Parent/Guardian _____