

Please return to registrar by December 16th, Last rehearsal before the break

PERMISSION, RELEASE & AGREEMENT FORM
Warm Beach Retreat
January 17-19, 2025

Participants Name (Please Print) _____

1. Parental Permission and Release Form

In consideration of the benefits to be derived, and in view of the fact that the Cascade Youth Symphony is an educational organization, participation in the programs of which is voluntary, and having full confidence that precautions will be taken to ensure the safety and well-being of myself or my child during this activity, I hereby agree to my or his/her participation in this activity and waive all claims against the leaders of this activity and the officers, agents, and representatives of the Cascade Youth Symphony Organization. It is understood that in the event of a serious illness or injury, reasonable efforts to reach me will be attempted. If I cannot be reached, I give my permission for my child to be treated in a hospital or clinic.

2. Retreat and Travel Agreement

I have read the Retreat and Travel Conduct Guidelines of the CYSO on the accompanying page and I fully understand them. I, as a participant, agree to abide by these policies. I, as a parent or guardian, will make every effort to support and encourage my son or daughter to abide by the guidelines.

- I would like Vegetarian meals
- I would like gluten free meals (Celiac intolerance cannot be accommodated. Refrigeration is available for personal food storage)

Food Allergies _____

Musician Signature _____

Musician cell phone _____ Musician email: _____

Parent Signature _____ Date _____

Parent Name (Please Print) _____

**Phone number where Parent or Guardian can be reached during the time of this activity.
(Please list two)**

1. _____ 2. _____