

Connecticut Gilbert & Sullivan Society

P.O. Box 313, Middlefield, CT 06455 860-554-1256 | www.ctgands.org

CG&SS PARENTAL CONSENT FORM

I give permission for my (son/daughter)			to participate in the Connecticut	
Gilbert & Sullivan Societ	y's (CG&SS) pro	oduction of <i>IOLANTHE.</i>		
understand that their pa printed media, and on C recordings of my son/da should they volunteer to CG&SS's production tea	articipation may G&SS's web sit aughter to be us o help with prod m helping them	y also include performing e and social media sites. sed to help publicize and duction activities, partici	hearsals as well as performing in the show. I further at special events, and appearing on radio or TV, in I give permission for photos, videos and voice promote the group and the show. I understand that pation might also include working with members of ound equipment, set construction and installation, I.	
	•	provide transportation, I are to the site of an event	give permission for my child to ride with other or rehearsal.	
unlikely event that they	need emergen		istory and Insurance information so that, in the you are unable to reach me or their other emergenc onders.	
	EMERGEN	CY CONTACT INFORMAT	ON: (please print clearly)	
Primary person to contact :			Relationship:	
Phone - Home	Cell	Work	Employer:	
Secondary person to co	ntact :		Relationship:	
Phone - Home	Cell	Work	Employer:	
	gency contact I		nediate medical attention and you are unable to reaction onnecticut Gilbert & Sullivan Society to obtain	
Connecticut Gilbert & Suliabilities, claims, action	ullivan Society a s, damages, exp	and its representatives, v	to release, hold harmless and indemnify the olunteers, and sponsors from and against all from my child's participation in the show, and/or f the group.	
Signature of Parent				
or Legal Guardian			Date	

please print your name and your relationship to minor