MASSACHUSETTS THESPIAN FESTIVAL HEALTH & LIABILITY RELEASE

Attach copy of both sides of Insurance Card ONE FORM PER STUDENT

Name of Student Participating _				
Grade Stu	dent Cell Phone (if applicab	le):		
Home Address	Home Phone			
City	State	Zip	Birthdate	
High School	Troupe #			
Name of Parent/Guardian/Emerg	gency Contact			
Phone Number(s) where above p	person can be reached			
Name of Secondary Emergency	Contact			
Phone Number(s) where above p	person can be reached			
List known allergies				
List any medications currently	taken			
Describe any existing medical				
Any past illnesses or other info	ormation that would be use	ful in the event medic	cal treatment is necessary:	
Attach a copy of the front and	back of the student's insur	ance card, if covered		
Insurance Co. (name):	or	I do not have med	lical insurance.	
Policy#	Group #	Phone a	#	
Family Physician	City	Phone #	<u> </u>	
	•	-	iblicity and or archival purposes.	

LIABILITY RELEASE

The undersigned hereby releases and agrees to hold harmless the International Thespian Society, (a component of the Educational Theatre Association), and its respective agents, employees, and representatives from any and all claims, demands, actions, and causes of action which the undersigned may have as a result of the student listed above participating in the Massachusetts State Thespian Festival.

The undersigned also agrees to the Festival's security rules and regulations (as stated in the Code of Conduct) with the understanding that, should any problems occur with the student during the Festival, the student will be returned home, and parents or guardian of the student will be required to pick up the student and will be financially responsible for all necessary costs incurred. The undersigned also acknowledges that Festival registration fees cannot be refunded.

The undersigned further understands that should a major medical problem arise, he/she will be notified by telephone. In the event that he/she cannot be reached, he/she hearby gives consent to such medical treatment, including the transfer of my child to a nearby hospital and the administration of emergency treatment as may be deemed necessary by medical personnel. The undersigned has listed above information concerning health insurance coverage, medications, known allergies, and existing medical conditions. The undersigned has also provided accurate emergency contact information.

MASSACHUSETTS STATE THESPIAN FESTIVAL CODE OF CONDUCT

- ONE FORM PER STUDENT -

ALL PARTICIPANTS: Please read and sign this contract. In addition, students must have the signature and contact number of a parent/guardian and the signature of the Director or Head Chaperone.

DIRECTOR OR HEAD CHAPERONES: Please send a signed Code of Conduct for each student. Please copy on back of Health/Liability Form (or staple these two forms together back to back) with copy of Health Insurance card and alphabetize.

Observing the following rules will make the Massachusetts Thespian Festival a pleasurable experience for all in attendance.

- · I realize that attending the Massachusetts Thespian Festival is a privilege.
- · I realize that I am representing not only my school and my troupe, but also my school district.
- · I will be attentive, cooperative, and appropriate at all times.
- · I understand that the Massachusetts Thespian Festival is a school event and all school rules are in effect for the entire event.
- · I will treat all school staff, all festival participants, all workshop leaders and adjudicators with courtesy and respect.
- · I realize that the proper theatre response is applause, with laughter (or tears) at appropriate moments, showing appreciation for all performers, presenters, and audience members.
- I will not destroy, damage, take, or rearrange any property that does not belong to me.
- · I will pick up any trash.
- · I will not leave the school at anytime without the approval of my Director or Head Chaperone.
- · I realize that all adults have the right to remove me from any activity, and report me to my Director or Head Chaperone for discipline if I am rude, uncooperative, or discourteous.
- I realize that students who cannot follow the Code of Conduct will be sent home without refund of fees and that a parent or guardian will be required to pick up any student, at the location, who is being sent home.
- · I will not bring or use any drugs, alcohol, or tobacco. I understand that breaking this rule will result in my IMMEDIATE removal from the festival, a referral to my school's administrator in charge of discipline, and exclusion from next year's Festival.

I AGREE TO THE ABOVE CODE OF CONDUCT AND WILL COMPLY WITH ALL RULES.

SIGNATURE OF STUDENT	
SIGNATURE OF PARENT/GUARDIAN	

Teachers MUST present Code of Conduct and Health & Liability Forms <u>for all</u> <u>students</u> at the time of you technical rehearsal.

Students will **NOT** be permitted to participate if any these forms are not completed or contain incomplete information.