

OCMEA Summer Music Institute Medical Form

Student Name _____ SMI Ensemble(s): Band Chorus Orchestra

Father's Name _____ Cell Phone _____

Mother's Name _____ Cell Phone _____

Emergency Contact _____ Emergency Phone number _____

Please answer the following questions:

1. Is your child currently taking any medication? (Please list and specify)

2. Will your child be carrying any medication with them at the SMI? If so, please list.

3. Does your child have any known allergies?

4. Please list any medical conditions or other pertinent information that the SMI staff should be aware of.

I, _____, provide this information to OCMEA for emergency purposes only. I understand that this document will be destroyed after the Summer Music Institute has been completed.

X Parent Signature _____ Date _____

Photo Permission:

We are sending you this parental consent form to both inform you and to request permission for the use of your child's photo/image in any future advertising for the Orange County Music Educators' Association's Summer Music Institute and on the Orange County Music Educators' Association web site. As you are aware, there are potential dangers associated with the posting of personally identifiable information on a web site since global access to the Internet does not allow us to control who may access such information. These dangers have always existed; however, we do want to celebrate your child and his/her work. The law requires that we ask for your permission to use information about your child. Pursuant to law, we will not release any personally identifiable information without prior written consent from you as parent or guardian. Personally identifiable information includes student names, photo or image, residential addresses, email address, phone numbers and locations and times of class trips. If you, as the parent or guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter to the OCMEA Executive Board and such rescission will take effect upon receipt by OCMEA.

Check one of the following choices:

- I/We **GRANT** permission for a photo/image that includes this student without any other personal identifiers (name, address, etc.) to be published on the OCMEA's public Internet site or in future advertisements.
- I/We **DO NOT GRANT** permission for photo/image that includes this student to be published on the OCMEA's public Internet site or in future advertisements

Student's Name: (print) _____ Student's Grade: _____

Parent/Guardian Name: (print) _____

X Parent/Guardian Signature:(sign) _____ Date: _____