



DUCSOM Registration

Student Information

Name _____

Address _____

City/State _____ Zip _____

E-mail _____ Current grade in school _____

Student home phone _____ Birthdate / /

Student cell phone _____ I use text messaging on this phone yes no

The best way to reach me *circle all that apply* home phone cell phone text messaging email

School _____ Grade _____

School music teacher _____ Instrument _____

Parent/Guardian Information

Name _____

E-mail _____

Parent home phone _____

Parent cell phone _____ I use text messaging on this phone yes no

The best way to reach me *circle all that apply* home phone cell phone text messaging email



Parent/Guardian Photo Release Form

Child Participant Name _____

- I hereby grant permission to Drake University to take, use, or publish my child’s likeness in video, audio, and photo recordings.**

I understand that Drake University may use my child’s likeness on its website or in other official printed publications without further consideration, and I acknowledge Drake University’s right to edit or treat the media at its discretion. I also acknowledge that Drake University may choose not to use my child’s photo at this time but may do so at its own discretion at a later date. I will make no monetary or other claim against Drake University for the use of my child’s likeness.

I also understand that once the video, audio, and photo recordings are posted on the Drake University website, the video, audio, and photo recordings can and may be downloaded by any computer user on or off site. Therefore, I agree to indemnify, release, discharge, and hold harmless from any claims in connection with the making, use, and/or publication of such recordings the following:

- Drake University
- Drake University Board of Trustees
- All volunteers, staff, and advisory members of Drake University

Drake University reserves the right to discontinue use of video, audio, and photo recordings without notice.

- You do not have my permission for video, audio, and photo recordings to be taken of my child for any reason.**

This release will supersede any previous releases on file.

I hereby warrant that I am a parent or legally appointed guardian of the minor and therefore have the right to sign this release form.

Parent/Guardian Name _____ **Phone number** _____
please print

Signature _____ **Date** _____