

Benold Choir Permission to Publish Pictures and Names

Dear Parent/Guardian,

Please consider granting the Benold Middle School Choir Program permission to print your student's name and/or picture on Social Media Websites, Newspapers, and Event Programs. Any name or picture will be used in a positive light and for a positive purpose such as group or student achievement. *Note: All BMS Choir Social Media is overseen by the directors of the program. Newspaper articles must be reviewed by the directors and GISD and administration.*

By signing below, I give permission for my student's name and/or picture to be used on social media websites, newspapers and event programs.

Name of Organization: Benold Middle School Choir

Student's Legal Name (please print): _____

Name as it will appear in media (please print): _____

Parent/Guardian Signature: _____ **Date:** _____

Benold Choir Travel & Transportation Permission Agreement

Parents and Students,

We are making travel permission very easy this year. If your student is a member of the Benold Choir Program, he/she will be participating in a variety of activities that may require travel. Georgetown ISD will provide transportation to and from specified events with parent/guardian permission. If you would like your student to participate in these activities, please initial the events and sign the agreement below.

_____ Middle School Region Choir Auditions @ Stony Point High School on Saturday, October 19, 2019

_____ Elementary Recruitment Visits @ Village Elementary, Ford Elementary, and Frost Elementary on January 1-31, 2020

_____ UIL Concert/Sight-Reading Evaluation @ Georgetown High School on Mon & Tues, March 10 & 11, 2020

My student, _____, has my permission to ride Georgetown ISD transportation to and from the above specified events.

I understand that this student may be missing classroom instructional time and is responsible for any work missed. I support my student and the opportunities provided to them in the Benold Choir Program.

Parent/Guardian Signature: _____ **Date:** _____

Emergency Contact Name: _____ **#:** _____

Please turn this form in to your director by Friday, August 30, 2019