



# STUDENT MEDICAL FORM

## AND PHOTO RELEASE

\_\_\_\_\_ (student) has my permission to participate in Corvallis School District's theater production. I agree to hold Corvallis School District, its officials, agents and employees harmless against any claim for injury or damage except in those cases where the acts of Corvallis School District, its officials, agents, and employees have been determined to be negligent by a court of competent jurisdiction. I understand that there is NOT any accidental insurance. Also, at my expense, I hereby authorize any duly authorized doctor, emergency medical technician, paramedic, nurse, hospital or other medical facility to treat said minor for the purpose of attempting to treat or relieve any injuries received by said minor while participating in or observing in the theater production.

My student has the following conditions/allergies (food/other) /special needs (*Please include any medical conditions including medically diagnosed behavioral conditions, eg: asthma, heart condition, etc*):

\_\_\_\_\_  
\_\_\_\_\_

My student is on an IEP or 504 at school for the following reason:

\_\_\_\_\_

The following medications must accompany my student while participating in theater productions:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

Please indicate **any other** information that theater personnel should know regarding your child.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Signature of Parent**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number(s)

\_\_\_\_\_  
Emergency/Alternate Contact Person

\_\_\_\_\_  
Emergency/Alternate Phone Number(s)

### PHOTO RELEASE:

I hereby give my consent to Corvallis School District Theaters and/or Drama program, its affiliates and agents, to use my child's image and likeness and/or any interview statements from me or my child in its publications, advertising or other media activities including the district theatre web page and CSDTheaters facebook page or other CSDTheaters promotional material.

\_\_\_\_\_  
**Signature of Parent**