MINOR CONSENT FORM

Matilda

	_ has my permission to	participate in the
activities of Gayord Community Productions, Inc. I am aware that Gaylord Community Productions, Inc. has rules and regulations against minors using alcohol, drugs, etc. and will not tolerate any violations of those rules and regulations. I also understand that Gaylord Community Productions, Inc. has behavior expectations and expects all participants to act responsibly during rehearsals. I will encourage my child to abide by these rules, and I understand that violations could result in my child forfeiting their right to participate.		
I understand that parents of with child supervision in ore participate, especially when babysitting service nor show expected to babysit.).	der for their children rehearsals get longe	to be able to er (GCP is NOT a
Parent/Guardian Signature		Date
PLEASE PRINT		
Child Name	Age _	
Address	_	
City		Zip
Primary Phone	Secondary Phone _	
Parents Name(s)		
Work Phone(s) of Parents (in case	of emergency)	
Other Emergency Contact		
Relationship to Minor		
Emergency Contact Phone		
School	Grade)