Student Release Form

All students must have a signed copy of the Student Release form on file in order to participate in PHAME classes and programs. This form applies to all future participation with PHAME, however PHAME may update the form in the future and require students to sign again. Please complete and submit this form using one of the following methods: email it to info@phamepdx.org, mail it to 1631 NE Broadway #134, Portland, OR 97232, or drop it off at the PHAME office. The form is due no later than the Monday before the beginning of the term.

Student Name ____________________________________________________ Date ________________________

1) I agree to read and follow PHAME’s Participation Requirements and Code of Conduct (www.phamepdx.org/schoolpolicies).

2) PHAME has my permission (during classes, rehearsals, performances, and/or PHAME-related events) to capture and use my likeness, name, voice, words, and/or artwork(s) in newspaper articles, radio, film, print, online, and other media, in any form, without compensation, for the purpose of advertising and/or communicating the purposes and activities of PHAME, and/or when applying for funds to support these purposes and activities, and/or other purposes as the organization sees fit.

3) I understand that PHAME is not responsible for my safety off-campus. PHAME is an open campus and I am free to leave campus during the school day, student activities, rehearsals, or performances. It is my responsibility to understand whether or not I can or should leave campus, and to act accordingly.

4) I understand that PHAME is not responsible for my safety before or after school hours, scheduled rehearsals, or performances. I understand that PHAME classes are held at Grace Church and that although the doors to the church are often unlocked, I should not enter the church until PHAME hours begin, and I agree to plan my travel arrangements so as to avoid arriving at PHAME before those hours begin. School hours will be determined and posted on a per-term basis, and individual rehearsal/performance times are to be determined and will be communicated to the student and/or the designated contact. I understand that PHAME staff will not be present more than 30 minutes before the start of school hours, rehearsals, or performances unless otherwise specified.

5) I understand that it is my responsibility to make transportation arrangements to and from PHAME classes, rehearsals, and performances. It is not within the purview of PHAME staff, teachers, volunteers, and Board Members to organize or provide student transportation.

6) I agree to hold PHAME and its directors, officers, employees, volunteers and other agents harmless from all suits, claims, or demands of every kind and character arising out of and in conjunction with this program, including risks involved regarding COVID-19.

7) I understand that in the case of an emergency, PHAME has permission to secure medical attention as deemed necessary. I understand that I will be responsible for all associated costs.

I hereby certify that I have reviewed and understand this release form and that by signing this form, I am agreeing to the above terms. I confirm that I am not relying on anything told to me in person, or on any statements aside from the Participation Requirements, Code of Conduct, and statements on this form.

Student Signature  ____________________________________________________  Date ________________________

If the student is unable to sign, a representative of the student may sign on their behalf:

I hereby certify that I have reviewed this release form with the above indicated student and am satisfied based on the review that the student understands this release and agrees to its terms.

Signature  ____________________________________________  Name  ____________________________________________  Date ________________________