



VIRTUAL CENTRAL MUSIC INSTITUTE

RELEASE FORM FOR PHOTOS, VIDEO, AUDIO and ONLINE VIDEO CONFERENCING

In consideration of my and/or my minor child's participation in VIRTUAL CENTRAL MUSIC INSTITUTE, I hereby grant to The Salvation Army the right to photograph, video or audio tape me/my minor child and to use the photo, recording, or other reproduction for electronic, print, digital, or electronic publishing via the internet. I consent to have these images used at the sole discretion of The Salvation Army.

I hereby grant permission for my minor child to attend online meetings (Lifesize, Skype, ZOOM, YouTube, Messenger, or through other video conferencing services) hosted by The Salvation Army employees and other faculty of VIRTUAL CENTRAL MUSIC INSTITUTE and with other campers and faculty involved in VIRTUAL CENTRAL MUSIC INSTITUTE.

Child's Name _____

Parent or Guardian's Signature _____
(Students age 18 and above may sign for themselves)

Address: _____

Parent Phone Number: _____ Parent Email: _____

Date: _____

