



Permission for Photographs/Videotapes/Audiotapes of VOCI Honors Choir participants

Student's Name: _____

Name of Parent(s)/Guardian(s): _____

Phone: _____ **Email:** _____

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Dear Parent(s)/Guardian(s) of _____:

VOCI is pleased to work with your child during this Honors Choir Camp. We may document our work through photographing, videotaping and/or audiotaping, when appropriate. Please review this permission form, and if you agree, sign and return the form to with your registration.

As the parent/ guardian of the student named above,

____ I DO

____ I DO NOT

Give my permission to Voices of Canton, Inc. to use my child's photo/video/ audio in VOCI publications, social media posts (including Facebook, Twitter, Instagram and other social platforms), the VOCI website, audio-visual presentations, and/or outside media news stories. This includes photographs, slides, audio/video and computer email or web pages.

If you have any further questions about the requirements, you may contact the Executive Director of VOCI, Carol Olson at 330.455.10000

Parent/Guardian Signature

Date