MEDIA RELEASE

I give Lewisville ISD, and Killian Middle School Orchestra my permission and consent to photograph (by video or photo, with or without sound track) the image, voice, **never listing his or her name**, of my child for use in media products (including district, campus, and orchestra websites and social media) for educational enhancement, media competitions, and reward for a job well-done.

Parent's Signature:
/Date
HANDBOOK ACKNOWLEDGMENT
I have received and read the Killian Middle School Orchestra Handbook , and I agree to abide by the rules and procedures outlined in it.
I understand that participation in the evening at Main Event (Lewisville, Oct **) and Hawaiian Falls (The Colony, in May) are optional, and I and my child participate at our own risk, and are responsible for our own safety at these events.
Please promptly bring any questions about any orchestra policy to Mr. Hood. A link to the handbook is available at www.killianorchestra.org, our Canvas classrooms, and on CHARMS.
Print Parent's Name:
Parent's Signature:
/Date
Print Student's Name:
Student's Signature:

_____/Date_____