



Photo, Video, and Website Release Form
Summer Classes and Workshops 2020
 (New Students Only)

Dear Parent or Guardian:

On occasion, representatives from the Haven Academy wish to photograph, videotape or interview students in connection with Haven Academy programs or events. Educating the public about Haven Academy is one of our objectives. The entire community benefits from knowing about the abilities of our students and about the programs Haven Academy offers to the children in our community.

In order to release student photos, video footage, comments or to post items on the Haven Academy website, we need your written permission.

To give your consent, please complete the form below.

I, _____, parent/ guardian of _____, give permission for my child to be photographed, videotaped and interviewed by representatives from Haven Academy for the purpose of publicizing the educational programs at Haven Academy. I authorize the use and reproduction, by Haven Academy and anyone authorized by Haven Academy, of any and all photographs, videotapes and interviews taken of my child, without compensation to me or my child. All of these photographs, videos and interviews shall be the property, solely and completely, of Haven Academy. I waive any right to inspect or to approve the finished photographs, videotapes, sound tracks, scripts and printed matter that may be used by Haven Academy.

Date: _____

Parent or Guardian Signature: _____

Address: _____

OR _____ I am 18 years of age or older and I give my consent without reservations to the foregoing on my own behalf.

Signature: _____

Address: _____



Liability Release Form
Summer Classes and Workshops 2020
Haven Academy of the Arts

I understand that Haven Academy of the Arts carries only liability coinsurance (secondary insurance). Should my child become injured at a Haven Academy sponsored event, I understand that my own family medical insurance will be billed first. Should my insurance not cover all necessary medical costs, I understand that Haven Academy's insurance policy dictates that I am solely responsible for the difference.

Parent or Guardian's Signature:

Date: ____ / ____ / ____