



Emergency Contact & Parental Release Form

Form must be signed in the presence of a notary!

To complete your child's registration for a Varna International tour, please complete, sign and return this form to:

Varna International
1225 Laurel St., Suite 331
Columbia, SC 29201

If parents are separated or divorced and both have legal custody of the participant, both parties MUST sign this document.

Name of Child: _____

Name of Parent/Guardian: _____

Name of Parent/Guardian: _____

Emergency Contact: _____

Emergency Contact Number: _____

Home: _____

Work: _____

Cell Phone: _____

I, _____, the parent or guardian of

_____ (name of child), hereby give permission for this child to participate in the Varna International Tours program.

I confirm that the child is voluntarily participating in this program organized by Varna International and the Dallas Asian American Youth Orchestra.

I hereby assume all risks of loss and injury that may be incurred, directly or indirectly as a result of my child's participation in all activities provided and / or organized by Varna International and Dallas Asian American Youth Orchestra.

I agree to indemnify and hold harmless Varna International, Dallas Asian American Youth Orchestra, their agents, officers, employees and volunteers from all claims of injury to person or property arising from my child's participation in this tour.

I/We have studied the purpose, schedule, and itinerary of the above-mentioned activity and give permission for the participant to join this program.

I/We hereby confirm that we have checked with our insurance company the coverage of the above named participant in case of accident, sickness, loss or damage of property. The insurance coverage is sufficient for the above named activity and the places traveling to.

I/We are aware of the fact that Varna International and Dallas Asian American Youth Orchestra will not take financial responsibility for sickness, accident, loss or damage of property or any unforeseen events.

I/We have read this agreement and understand all its terms to my/our complete satisfaction.

Date _____ Place _____

Signature of Parent

Print

Signature of Parent

Print

State of: _____ County

Sworn before me this _____ day of _____, 20____.

Signature of Notary Public

My Commission expires: _____

Notary seal required below.