2024 West Virginia ACDA All State High School Honor Choir

Medical Permission Form, Liability Waiver, Expectations and Media Release

West Virginia ACDA Annual Conference | Morgantown, West Virginia – February 1st-3rd, 2024

Required of all participants.

Please type or print in blue or black ink.

Participant's	s Name:					
	(L	ast)		(First)		(Middle)
Health Insu	rance Provider:		Polic	y Number:		
List all prese	cription medications	you are curren	tly or might be ta	king:		
Name:		_Dosage:	Frequency:	F	Reason:	
Name:		_Dosage:	Frequency:	F	Reason:	
List any kno	own food, drug, anim	nal, or environn	nental allergies: _			
List any med	dical conditions for v	which the parti	cipant is currently	receiving medical tre	atment:	
Physicians Name:				Office Phone: ()	
Address:				Home Phone:()	
				Cell Phone: (_)	
The student	c's teacher has my pe	rmission to ada	minister (dual per	son observed and do	cumented) the	following to the
participant i	f warranted:					
(Circle)	Tylenol	Ibuprofen	Imodium	Dramamine		
	Pepto-Bismol	Maalox	Tums	Other:		
If you wish	to be called before a	ny over the co	unter medication	is dispensed, please in	itial here:	

If the participant listed above should require medical attention while participating in the West Virginia ACDA All State High School Honor Choir in Morgantown, West Virginia, February 1-3, 2024, the Honor Choir Coordinator and the designated chaperone have my permission to treat on site or take said participant to a doctor, hospital, or any other medical facility for necessary medical treatment, and I here-by authorize the release of medical information included on this document to the health care provider administering medical treatment to the participant.

I hereby release, indemnify, and hold harmless the American Choral Directors Association ("ACDA"), its trustees, employees, volunteer workers, students, agents and assigns from any and all liability, damage, claim of any nature whatsoever arising out of or in any way related to my/my child's participation in the West Virginia ACDA All State High School Honor Choir in Morgantown, West Virginia.

Participating in any activity is an acceptance of some risk of injury. I agree that my/my child's safety is primarily dependent upon taking proper care of oneself. Despite precautions, accidents and injuries may occur and injury and/orloss or damage to personal property may occur as a result of participating in the West Virginia ACDA All State High School Honor Choir; therefore, I assume all risks related to participating in the West Virginia ACDA All State High School Honor Choir. I

also hereby acknowledge that the American Choral Directors Association, its trustees, employees, volunteer workers, students, agents and assigns assume no liability whatsoever for personal injuries or property damage that may arise out of my/my child's participation in the West Virginia ACDA All State High School Honor Choir.

My signature on this form indicates that I have read, understood, and freely signed this agreement. I expressly agree that this agreement shall be construed and enforced in accordance with laws of the States of West Virginia and Oklahoma (National ACDA), with Oklahoma County being the court of exclusive jurisdiction, and I consent to the jurisdiction of the State of Oklahoma and of the courts of Oklahoma County. I agree that this waiver and release is intended to be as broad and inclusive as permitted under the laws of the States of West Virginia and Oklahoma so that if any portion hereof is held invalid, the balance shall continue in full legal force and effect.

Also, I hereby agree that WVACDA has unlimited rights to use any audio/video recording and photographic images of my child's participation and performance at the WVACDA conference.

Parent/Guardian Name (Print):

	Signature:		
Home Phone: ()	Cell Phone: ()
Work Phone: ()	Other Phone: ()
Expectations:			
While participating in	the WVACDA All	State High School Honor Choir, p	articipants will adhere to the following behavior
expectations: Singers m	nust be present and	on time for every rehearsal and sche	eduled activity. Singers must have music prepared
before arriving at the ev	vent and will bring t	heir music and a pencil to all rehear	sals. Singers will refrain from the use of profanity
and/or derogatory/hui	rtful remarks toward	d other students, directors, etc. Sing	gers will respect the authority of all directors and
other individuals helpir	ng to make the even	t run smoothly. The use of tobacco	, drugs, and/or alcohol is strictly prohibited. Cell
phones will be permitt	ed outside the rehe	arsal space before or after a rehear	sal. Cell phones must be out of sight/turned off
during rehearsals. All re	ules and regulations	from individual schools apply.	
Participant's Nam	e (Print):		
Participant's Signa	ature:		

Please send this form (printed two sided) completed and signed to:

Buckhannon-Upshur High School C/O Jeremiah Smallridge 270 B-U Drive Buckhannon, WV 26201