

**Chandler Children's Chorale  
Liability Waiver**

My Singers Name: \_\_\_\_\_

Parent or Legal Guardian's Name: \_\_\_\_\_

As the parent or legal guardian please read and initial you agree to the following:

- 1) Chandler will take precautions to provide a safe, enjoyable class environment for my child, I recognize that there is still inherent risk due to the possibility of COVID-19 infection to my child. \_\_\_\_\_
- 2) I will competently assess my child's health and NOT send them to class if they are showing any signs of illness, fever or other symptoms. \_\_\_\_\_
- 3) If my child becomes ill while at class I understand that I will be notified and will need to arrange for my child's immediate pickup. \_\_\_\_\_
- 4) If my child has a medical emergency while at class, I will be notified at my emergency contact number, and the secondary emergency contact will be notified but if neither can be reached, I give permission for immediate emergency medical treatment. \_\_\_\_\_
- 5) I understand that if my child is unable to follow the rules and is endangering others, they may be sent home with no refund given. \_\_\_\_\_
- 6) I understand that CCC, Chandler, the Randolph Singers, their Staff, Volunteers, Agents, and Assignees may take photographs and video of my child for purposes of promotion or advertisement in print and social media for the benefit of Chandler or The Randolph Singers. In addition, I understand that if I prefer that my child's image or likeness not be used for these purposes, I will email Chandler staff at [director@chandler-arts.org](mailto:director@chandler-arts.org), copying [chandlerchildrenschorale@gmail.com](mailto:chandlerchildrenschorale@gmail.com) within 48 hours of my child's acceptance into Chandler Childrens Chorale and ask to have my child excluded from photographs and video prior to the start of my child's class experience. \_\_\_\_\_
- 7) I/we agree to defend, indemnify, and hold harmless CCC, Chandler Center for the Arts, Inc. and the Randolph Singers, their Staff, Volunteers, Agents, and Assignees from liability and claim for damages because of bodily injury, death, sickness, disease. \_\_\_\_\_

Parent or Legal Guardian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_