



Release Form for Student Participant
(under 18 years old)

I, _____ understand that HERENCIA Mariachi Academy does not provide insurance coverage for Medical care for my **CHILD**, _____'s participation in the academy.

I further understand that there are certain risks and hazards that may arise in the course of this activity, including accidents or illness. I hereby assume that inherent risks and hazards of my child's participation in this activity. I acknowledge that any claims for damages against HERENCIA Mariachi Academy would be governed by the laws of the State of California.

I, _____ agree that HERENCIA Mariachi Academy may use such photographs of my **CHILD** _____'s with or without their name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and Web content.

Acknowledgement of Risk Factors for Participant

Parent Signature: _____ Date: _____