

## Health & Consent Form

### MB Sings 2024

*This form must be completed by the parent or legal guardian for **singers under the age of 18** to participate in Manitoba (MB) Sings 2024. Please complete a separate form for each child registered. Forms must be submitted no later than **January 31, 2024**. Please return all completed forms to [info@mbchoralassociation.ca](mailto:info@mbchoralassociation.ca).*

Participant (Singer) Name: \_\_\_\_\_

Participant Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ MB Sings Choir:  Junior (Gr. 5-8)  Senior (Gr. 9-12)

Parent/Legal Guardian Name: \_\_\_\_\_

Address (if different from Participant): \_\_\_\_\_

Phone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_ (Other): \_\_\_\_\_

Email: \_\_\_\_\_

Please list any allergies and/or known medical conditions of the Participant:

I, \_\_\_\_\_ (Parent/Guardian name), hereby give permission for \_\_\_\_\_ (Participant name) to participate in MB Sings from February 2-4, 2024. I hereby release Manitoba Choral Association from liability for any accidental injury and/or illness, including COVID-19, that he/she/they may incur while participating in the event. I acknowledge that Manitoba Choral Association may use, publish, reproduce, distribute and/or promote the recorded voice and/or likeness of all singers in this program in photographs and/or audio-visual recordings taken over the course of the weekend.\*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*\*If you are unable to provide consent for your child to appear in photographs and/or audio-visual recordings, please contact [info@mbchoralassociation.ca](mailto:info@mbchoralassociation.ca). All information provided on this form will be kept private and confidential and used solely in the context of the MB Sings 2024 program.*