

CONSENT FORM

Robert McQueen High School Band
6055 Lancer Street
Reno, NV 89523

I, _____, the undersigned Parent or Guardian of _____, a Band Member, hereby give my consent and approval for said Band Member to participate in all Band Trips and Functions of the Robert McQueen High School Band for the 20___ / 20___ school year.

Dated this _____ day of _____, 20___

Parent or Guardian Printed

Parent or Guardian Signature

I consent to the McQueen Band and /or School and/or District's use of my child's photograph, voice and/or name in various media projects including, but not limited to, yearbook, class composite picture, television, radio, newspaper, and internet (social media).

McQueen Band Website is public, McQueen Band FaceBook page is a closed group.

Student Name: _____

Dated this _____ day of _____, 20___

Parent or Guardian Printed

Parent or Guardian Signature