

Sioux Falls Has Talent!
Parental Release for Minors Form

This form must be completed for all individuals under the age of 18.

I hereby guarantee that I am the parent and/or guardian of the individual who signed the Audition Information Sheet, that I am at least 18 years of age and that I have given my full consent for the individual to participate in the audition process and showcase performance should they be selected. I hereby release WPMI from and against any and all claims, liabilities and expenses. I agree to cause said individual to adhere to all provisions and regulations for participants and that I agree to be bound by and to perform all of the terms and conditions of the rules and regulations. I hereby grant full consent for the taping and use of me or my child/ward's appearance, name, voice, likeness, etc. in conjunction with the Program and the audition.

Name of Minor: _____

Print Name of Parent/Guardian: _____

Relationship to Minor: _____

Home Phone: _____ Cell Phone: _____

Address: _____

City: _____ State: _____

E-Mail Address: _____

Signature: _____ Date: _____

**If the Above Parent/Legal Guardian will not be present at audition,
the parent or guardian MUST also sign below .**

I hereby authorize _____ ("Individual Accompanying Minor") to accompany my minor child/ward to participate in the audition and showcase performance process. I agree to release all parties from and against any and all claims, liabilities and expenses related to or connected with any such person accompanying my child/ward.

Signature: _____ Date: _____

Print Name: _____

Individual Accompanying Minor (not Parent or Guardian) Must also sign below.

I hereby guarantee that I am the Individual Accompanying Minor as designated by the minor's parent/guardian above. I agree to be responsible for the safety, health and welfare of the minor during the audition process. In addition, I hereby agree to be bound by and to perform all of the terms and conditions of the Participant Consent and Release form. I grant full consent for the taping and use of me or my appearance, name, voice, likeness, etc. in conjunction with the Program and the audition.

Signature: _____ Date: _____

Print Name: _____ Phone Number: _____

E-Mail Address: _____