

**SHOOTING STARS 2018**  
**VISUAL ARTS PARTICIPANT PERMISSION SLIP**

PLEASE READ GUIDELINES CAREFULLY PRIOR  
TO ENTERING AND SIGNING THIS FORM.

If guidelines are not attached they can be found at [www.wataugaeducationfoundation.org](http://www.wataugaeducationfoundation.org)

**(This Permission Slip must be attached to artwork)**

Visual Artist's Name: \_\_\_\_\_

Title of artwork: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-Mail Address of Parent/Guardian: \_\_\_\_\_

I, the parent/legal guardian of participant, \_\_\_\_\_, hereby give my consent for participation in Shooting Stars 2018. I assume all risks and hazards incidental to such participation, including transportation to and from all events and do hereby waive, release, absolve, indemnify and agree to hold harmless the Watauga Education Foundation, its contractors, volunteers and any sponsoring agency, for any claim arising out of any loss or injury that participant or participant's artwork might sustain while engaged in this program.

I understand that the Watauga Education Foundation does not provide insurance and is not responsible for the medical condition of the participant. I agree to the release of photographs, audio and visual recording of the participant for the promotion of Watauga Education Foundation. I have read the Shooting Stars 2018 Guidelines and agree to abide by the requirements of participation therein. I acknowledge that Shooting Stars 2018 serves multiple purposes, including providing educational opportunities for participants, fundraising opportunities for Watauga Education Foundation, and the general advancement of the arts in Watauga County and that conflicts which arise in accomplishing those goals will be resolved solely by the Watauga Education Foundation.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
TEACHER- I have screened the above listed artwork and my signature indicates that I approve this submission in accordance with Shooting Stars 2018 Guidelines.

Sponsoring Teacher: \_\_\_\_\_

School: \_\_\_\_\_ email: \_\_\_\_\_