



**TEXAS
THESPIANS™**

**AN EDUCATIONAL THEATRE
ASSOCIATION AFFILIATE**

Adult Delegate

Medical/Photo/Video Consent Form

TEXAS THESPIANS, an affiliate chapter of the Educational Theatre Association, requires that this form be completed for each Delegate.

- **Delegate** is defined as anyone who is attending a Texas Thespians event.
- The Delegate is responsible for any fees incurred from a medical emergency
- Type or print legibly
- Enter name exactly as it appears on registration form

Delegate/Attendee Information

Name of Company, School, or University _____

Delegates Name _____ Cell # _____

Gender _____ Birthdate _____ Work # _____

Home Address _____

City _____ State _____ Zip Code _____

Emergency Contact Name _____ Emergency Contact # _____

I. RELEASE

The undersigned hereby releases and agrees to indemnify, save and hold harmless the **TEXAS THESPIANS**, the International Thespian Society, the Educational Theatre Association, and all respective officers, employees, agents, and representatives of the aforementioned entities (each an "Organizer" and collectively the "Organizers") from and against any and all claims, demands, causes of actions, losses, liabilities, judgments, damages, costs and expenses (including reasonable attorneys' fees) resulting from the Delegate listed above participating in the **TEXAS THESPIANS STATE FESTIVAL, JUNIOR THESPIAN FESTIVAL, LEADERSHIP DAY, and EDUCATOR CONFERENCE**. The undersigned shall give each Organizer prompt written notice of any claim or facts or circumstances that might give rise to any claim for indemnification. The undersigned further agrees to be responsible for Delegate while traveling to and from **TEXAS THESPIANS EVENTS**, including any expenses incurred by the Delegate, causes by the Delegate, and/or any personal injuries which may occur to the Delegate.

II. RULES AND REGULATIONS

The undersigned shall abide by the **TEXAS THESPIANS** security rules and regulations (as described in detail at www.texasthespians.org). The undersigned understands that, if the Delegate violates any of the **TEXAS THESPIANS EVENTS** security rules and regulations **the Delegate may be returned home**, and the undersigned (or other parents and/or legal guardians) may be financially responsible for all necessary costs incurred while sending Delegate home. The undersigned also understands that TEXAS THESPIANS will follow its posted refund policy for all events.

III. PHOTO/VIDEO RELEASE

The undersigned irrevocably consents to being photographed or being recorded by means of video or audio tape recording by the Organizers, or a designated representative of the Organizers. These photographs and/or recordings can be used, without compensation to the undersigned and/or the Delegate, in any public display, publication or media, or website, or in any manner or form, and at any time by the Organizers in promotion of the mission to promote the theatrical arts and have theatre arts recognized in all phases of education. The undersigned releases the Organizers, and their employees, agents, representatives, associates, Board of Directors members, and consultants from any liability in connection with the use of such photographic, video, and/or materials.

IV. SOCIAL MEDIA & SOLICITATION POLICY

Social Media: Delegates may not use social media sites to publish disparaging or harassing remarks about Texas Thespian members. Delegates who chose to post editorial content to websites or other forms of online media must ensure that their submission does not reflect poorly upon Texas Thespians. Consequences for actions deemed inappropriate: 1) Remove or edit comments at any time, whether or not they violate this Policy. 2) Ban future posts from people who repeatedly violate this Policy. We may affect such bans by refusing posts from specific email addresses or IP addresses, or through other means as necessary. 3) Disciplinary actions that is decided on by the Texas Thespians Board of Directors. 4). Removal from Festival. Solicitation: Selling, soliciting, or fundraising of any kind is strictly prohibited. Delegates will be removed from Festival if found violating this policy.

V. AUTHORIZATION

I consent to the use of disclosure of protected health information by the closest medical facility for the purpose of analyzing, diagnosing, and providing treatment to the above-stated delegate, obtaining payment for health care services rendered or to be rendered, or to conduct health care operations. A copy of this consent is as valid as the original. I authorize my insurance benefits to be paid directly to the closest medical facility. I assume full responsibility for and agree to pay for all services rendered or to be rendered. I understand I have a right to receive a copy of this consent upon request and to revoke this consent in writing at any time except to the extent that the closest medical facility has taken action in reliance on this consent. This authorization is valid one year from the date signed or through the term of coverage of the policy, and during the required period to process the claims.

VI. COVID PROTOCOLS

All Center for Disease Control (CDC) policies will be followed. By attending Texas Thespians events, the Delegate/Delegate's parent/s and/or guardian/s agree and acknowledge the contagious nature of COVID-19 and its variants and voluntarily assume the risk that they/you may be exposed to or infected by COVID-19. All delegates agree to follow the Texas Thespians Covid-19 policies at the time of the event, while at the event.

The Delegate has read, understands, and agrees to be bound by the above provisions, as evidenced by their signature below:

Delegate's Name - Typed _____

Signature of Delegate _____

Date _____