

Performers Release Form Joharah's Fall Hafla and Workshop – May 11 & 12, 2012

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I, the undersigned (or Legal Guardian), certify that I am 18 years or older, and have read this release and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

PLEASE PRINT

Performance (Stage) Name: _____

Group Name (if part of a group): _____

Legal Name of Performer: _____ Age (if minor): _____

Parent/Legal Guardian Name, if minor: _____

Relationship to performer (if appropriate): _____

E-mail: _____ Contact Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

All sections must be filled out completely. Form MUST be signed manually.

PERFORMER SIGNATURE

(Must be signed by Parent/Legal guardian, if under 18)

Information collected will not be shared, used or disclosed for any purpose other than as stated above.