



MEDIA CONSENT AND LIABILITY WAIVER

**This form is to be completed by the individual granting permission.
If the participant is a minor, a parent or legal guardian must complete the form on their behalf.**

Select Event:

___ Mississippi Baptist All-State Youth Choir & Orchestra

___ HeartSong

___ Summer Music & Arts Camp for Kids (SMACK)

___ Young Musicians Honor Choir

MEDIA CONSENT

For Adult Participants:

I, _____, hereby expressly grant the Mississippi Baptist Convention Board (MBCB), and its employees, agents, and assigns, permission to photograph, record, and use photographs, motion pictures, audio, or video in which I am a part. I acknowledge that my participation is voluntary and that no compensation will be received.

For Parents/Guardians of Minors:

I, _____, as parent or legal guardian of _____, hereby grant the same permissions as stated above on behalf of my minor child. I hereby release any claims of ownership of said items and release MBCB and its representatives from liability for any claims made by me, my representatives, or any third party in connection with the above. I also agree that neither I nor the minor will participate in any other television or radio production, such as gaming or other types of commercials, in which our image or participation might reflect negatively on the Mississippi Baptist Convention Board.

LIABILITY WAIVER AND RELEASE

In consideration of the permission extended to me by Worship Ministries, Mississippi Baptist Convention Board to participate in the activities of this event, I hereby release and hold harmless the Mississippi Baptist Convention Board and William Carey University, their officers, directors, agents, employees, property owners, instructors and associates of and from any and all manner of actions and causes of actions, judgments, executions, debts, claims and demands of every kind and nature whatsoever which against them I have had or now have of which I or my heirs, executors or administrators have now or may hereafter have by reason of my participation in this event, as well as, campus operations incident thereto. The undersigned hereby declares that the terms of the herein release and information disclosed have been completely read and are fully understood and voluntarily accepted.

Adult Participant or Parent/Guardian Signature

Date

NOTARY ACKNOWLEDGEMENT

State of _____

{AFFIX NOTARIAL SEAL BELOW}

County of _____

Personally appeared before me, the undersigned authority in and for the said county and state, on this

_____ day of _____, 20____, within my jurisdiction, the within named

_____, who acknowledged that

he/she acknowledged that the matters contained in the above letter are true and correct.

Notary Public

My Commission Expires

Scan and e-mail this form to wmforms@mbcb.org