



Quick Studio Reference Form

Student Name: _____

Parent(s) or Legal Guardian Name: _____

Emergency Phone #: _____

Does your child have any allergies? _____

Does your child have any medication(s) they need to take during camp?

Does your child have any health issues we should know about?

Who can pick your child up (names and phone number)

Can your student be photographed and videotaped for promotional materials that include print, TV, radio and social media?

Yes

No

Form completed by:

_____ (Signature)

_____ (Print Name)

Relationship to Student: _____

Date: _____