



CODE OF CONDUCT

I, _____ (student name), agree to abide by the following rules of conduct as a participant in the 2019 Prague Piano/String Festival (the “Festival”):

1. I understand that participation in the Festival is at the discretion of the Festival director and subject to the condition that I fully comply with the directions of the Festival director and my private instrumental teacher at all times. Failure to conform my behavior to the following standards may result in termination of my Festival participation and immediate departure from the Festival.
2. I will show my Festival identification on request in order to enter the Jan Hanus Art School and I will follow the rules of the Jan Hanus Art School as explained to me at the Festival orientation. For safety reasons, the main door to the building must always remain locked!
3. I will respect the grounds of the Jan Hanus Art School. I will leave practice and rehearsal rooms clean and orderly. I will recycle water bottles, dispose of trash in appropriate receptacles, and wash any items I may use in the School kitchen. I understand that the Festival is not responsible for my personal property if left unattended.
4. I will never place drinks or food on or near any of the pianos.
5. I understand that use of narcotic drugs is illegal in the Czech Republic. I will not use, possess, and/or distribute illegal substances including narcotic drugs. If I violate this rule, I understand that the Festival is not responsible for any Czech criminal sanctions that may result from my violation of Czech law including fines and/or imprisonment.
6. I understand that alcohol consumption is legal in the Czech Republic for anyone over 18. If I choose to consume alcohol, I will do so responsibly and not to excess. I understand that the Festival is not responsible for my choices including intoxication or illness that may result from excessive alcohol consumption. I will not provide alcohol to any Festival participant under the age of 18.
7. If I am under 18, I will not purchase or consume any alcoholic beverages, nor will I request that older participants purchase alcohol on my behalf.
8. I have been advised of the Festival’s recommendation to obtain health insurance for the duration of the Festival. I understand that if I require medical treatment or hospitalization, I will be fully responsible for payment of all associated costs.

I have read and agree to these conditions:

Name: _____

Student Signature (if student is 18 or older): _____

Parent Signature (if student is under 18): _____



AGREEMENT OF PARTICIPATION

I, _____ (student name), will attend the 2019 Prague Piano/String Festival (the “Festival”) from July 7-20, 2019.

I acknowledge that my participation in the Festival will involve public performances. I agree that _____ (student name) may take part in such performances without compensation. By registering for the Festival, I grant the Festival and those acting on its behalf, the authorization to:

- Record all students’ public performances, participation, and appearances on audio and video media, photograph, film or any other medium;
- Use students’ names, voices, biographical materials in connection with these recordings;
- Exhibit and/or distribute such recordings in whole and part, without restrictions and limitations, for any educational or promotional purpose that the Festival and those acting on their behalf deem appropriate. I agree that all rights in and to any and all recording made of students' performances, including all video media audio media, film and photographs shall be owned exclusively by the Festival.

I understand that selection for performance in masterclasses and concerts is at the discretion of my private instrumental teacher and the Festival director.

I understand and agree to abide by the Code of Conduct.

Name: _____

Student Signature (if student is 18 or older): _____

Parent Signature (if student is under 18): _____



MEDICAL RELEASE

Student Name: _____

Gender: _____

Date of birth: _____

Age as of July 1, 2019: _____

Medical Information:

Medical Insurance Company: _____

Policy Number: _____

Students without medical insurance are strongly recommended to purchase insurance for the duration of their stay in the Czech Republic.

Health and Dietary Information (If not applicable, enter "None"):

Allergies: _____

Dietary and/or Health Restrictions: _____

Current medications: _____

Recent illnesses or chronic medical conditions: _____

Restrictions on activities: _____

Emergency Contact Information:

Name: _____ Phone: _____

Email: _____ Alternate Phone: _____

Release and Authorization:

I _____ give permission for _____ to
(parent or guardian if student is under 18) (name of student)

participate fully in all activities of Prague Piano Festival except as noted above and authorize the Festival Staff to provide any necessary medical treatment for _____ in case of
(name of student)
emergency.

Signature: _____
(parent or guardian if student is under 18)

Date: _____



WAIVER

I _____ (student name) understand and agree that as a condition of my use of the facilities assigned to the Prague Piano/String Festival (the “Festival”), I assume all risk of personal injury, death or property loss resulting from any cause whatsoever including but not limited to the inherent risks of the program, breach of contract, breach of statute, or breach of the duty of care on the part of individuals including but not limited to Festival staff, representatives, employees, and agents.

I agree that the Festival, its employees and agents shall not be liable for any such personal injury, death or property loss which occurs outside the program parameters and release the Festival, its representatives, its employees and its agents of all claims with respect thereto.

Accepted and agreed:

Name: _____

Student Signature (if student is 18 or older): _____

Parent Signature (if student is under 18): _____