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eugeneoneill.org

PARENT/GUARDIAN PERMISSION FORM

Scan and email to taohouse.eonf@gmail.com

YOU MUST EMAIL THIS FULLY-COMPLETED AND SIGNED FORM TO PARTICIPATE IN STUDIO RETREAT AT TAO HOUSE!

Student Name: _____ **Birth Date:** _____

My son/daughter has my permission to attend **Studio Retreat at Tao House Jun. 18 - 29, 2025** from 8:30am until 3:30 pm, **with a break Jun. 23 & 24.** I understand my son/daughter will meet a National Park Shuttle at one of two designated pick-up locations for transportation to the Eugene O'Neill National Historic Site, Tao House in Danville, and will be returned to the same pick-up location at the end of the day's activities around 4:00 pm. If I cannot be reached in an emergency, I authorize the event chaperone to act on my behalf, obtaining the services of a licensed physician if in his/her judgment any illness or accident should so indicate.

Parent/Guardian signature: _____ **Date:** _____

Parent/Guardian printed name: _____

PLEASE LIST KNOWN ALLERGIES:

Food Allergies: _____

Other Allergies: _____

Medications: _____

IN CASE OF AN EMERGENCY, PLEASE NOTIFY:

(1) Name: _____

Cell Phone: _____

Relationship: _____

Home Phone: _____

(2) Name: _____

Cell Phone: _____

Relationship: _____

Home Phone: _____

MEDIA/PHOTO RELEASE

I give permission for the Eugene O'Neill Foundation, Tao House, and its representatives, the National Park Service, and outside media agents (newspapers, television, etc.) to take photographs, video, and otherwise document my child / myself involved in the activities of this program, including social media.

I give permission for any photographs or video material of my child / myself to be used in publicity about the program (website, promotional materials, newspapers/magazine articles, social media, etc.)

Parent/Guardian Signature: _____

Parent/Guardian Name (printed): _____ **Date:** _____