

CABE 2025 Mariachi Festival & Competition

Parental/Guardian Media Release Form

Saturday, March 29, 2025 • Long Beach Convention Center - Hall B

Participant Information

Name of Child/Participant: _____

Date of Birth: _____ School/Organization _____

Parent/Guardian Information

Name of Parent/Guardian: _____

Relationship to Child: _____

Phone Number: _____ Email Address: _____

I, the undersigned parent/legal guardian of the above-named participant, grant permission for my child to participate in the California Association for Bilingual Education (CABE) 2025 Mariachi Festival & Competition. I further grant permission for CABE to record, photograph, and/or video my child during the event.

I understand that these recordings may be used for the following purposes:

- Promotion and publicity related to CABE events and programs.
- Inclusion in CABE's educational materials and publications.
- Sharing on CABE's official website, social media platforms, and press releases.

I acknowledge:

- I will not receive financial compensation for the use of my child's image, video, or audio recordings.
- All media assets remain the property of CABE and may be used in perpetuity for the above-stated purposes.
- I release CABE, its employees, representatives, and event affiliates from any claims, demands, liabilities, or damages related to the use of these media materials.

Acknowledgment and Consent

By signing below, I confirm that I have read and fully understand the terms of this media release form. I agree to these terms on behalf of my child.

Signature of Parent/Guardian: _____ Date: _____

Printed Name of Parent/Guardian: _____

Thank you for supporting the CABE 2025 Mariachi Festival & Competition!