



NEW ENGLAND

PIANO TEACHERS' Assoc., Inc.

**NEPTA MENTORING PROGRAM  
PARENTAL PERMISSION FORM**

I, \_\_\_\_\_, the parent/guardian of  
\_\_\_\_\_, permit him/her to participate in the NEPTA  
Student's Name

Mentoring Program. I understand that my child will be supervised by  
\_\_\_\_\_ at all times.  
Mentor

I understand that the people who serve as mentors are members of NEPTA and are experienced teachers volunteering their teaching expertise to Mentees.

The mentoring teacher will inform me of the scheduled lessons to be observed by the Mentee.

Full names and contact information of students will not be given to the Mentee.

I reserve the right to withdraw my child from the NEPTA Mentoring Program at any time.

**DISCLAIMER AND WAIVER OF LIABILITY**

*I understand and agree that the New England Piano Teachers Association ("NEPTA") shall not be responsible for any bodily injury, property damage or loss sustained or incurred by me or my child during such time(s) when we are participating in the NEPTA Mentorship Program. I hereby waive, forfeit, and forever release NEPTA and its Mentees, their successors and/or assigns from any liability, whether personal or professional.*

**Please print:**

Name of Parent or Guardian \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Date**

Received by \_\_\_\_\_

**Signature of NEPTA Mentoring Program Chairperson**

\_\_\_\_\_  
**Date**