



Mississippi School for the Blind Third Annual Braille Bee

Jackson, Mississippi Thursday, February 14, 2019

Sponsored by Mississippi School for the Blind

2019 APPLICATION & PERMISSION FORM

Student's Name: _____

Birthdate: _____ Age: _____ Grade: _____

School District: _____

Number of years participating in MSB Braille Bee: _____

Parent's Name(s): _____

Address: _____

City _____, MS Zip Code _____

Email (if available) _____

Description/Name of Visual Disability or Condition _____

Adult(s) attending with student _____

To be completed by Teacher of the Visually Impaired (please fill out completely).

Name of Teacher of the Visually Impaired _____

Email Address: _____

Phone Numbers: _____

Please mark only one. Student Contest Level: One Two Three

If any accommodations needed, please list below:

No entry fee required.

Lunch will be available for purchase in the MSB Cafeteria or you may eat on your own at any local establishment. If you wish to eat in the cafeteria, please indicate below by checking yes or no and how many meals you anticipate ordering.

YES, we plan to eat in the MSB Cafeteria. We need _____ (number) meals. **NO**, we will not eat in the MSB Cafeteria.

Parents/Guardians please read, check, and sign as appropriate. All forms must be signed by the parent or legal guardian.

I give my permission for my student to participate in the Braille Bee sponsored by the Mississippi School for the Blind. I acknowledge that I will be attending with my child.

I hereby authorize Mississippi School for the Blind to photograph, videotape, or otherwise record by visual, audio, electronic or manual means the visual likeness and/or voice or other sounds created by the student named above (collectively "reproductions"). Mississippi School for the Blind may use or permit to use the reproductions in any CD, DVD, exhibition, display, publication, solicitation, or promotional or educational material or on any website including without limitation Mississippi School for the Blind's website, Facebook or YouTube without compensation to the contestant, the contestant's heirs, successors or assigns.

Parent's Print Name _____ Parent's Signature _____ Date _____