

**VALLEY OF THE MOON
SCOTTISH FIDDLE SCHOOL 2009
Guardian Agreement Form**

I assume full responsibility to make decisions necessary to the well-being of
_____, the minor child for whom I
will act as guardian at Valley of the Moon Scottish Fiddle School 2009. I also
agree to assume full responsibility for his/her actions at the fiddle camp.

(signature of guardian)

(date)

Form must be returned by July 1, 2009 to:

Cherry Clark
1281 Fifth Ave
San Francisco, CA 94122

Any questions, call (415) 566-4355; email vom@sonic.net