

**VALLEY OF THE MOON  
SCOTTISH FIDDLE SCHOOL 2010  
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, 2010 to:**

Cherry Clark  
1281 Fifth Ave  
San Francisco, CA 94122

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