

**LIABILITY WAIVER AND PERMISSIONS
FOR
Art and Soul Party Studio Art Camp/Classes**

ASSUMPTION OF RISK AND RELEASE OF LIABILITY (please read carefully)

I, _____ (Name of Parent of Child Participant), understand that I am participating in the Art and Soul Party Studio Art Camp/Classes beginning on _____ and concluding on _____. I agree to RELEASE and to HOLD HARMLESS the DBA Art and Soul Party Studio and its officers, directors, employees, owner, agents and representatives from any and all claims, losses, expenses and demands, including those resulting from any injury, or death, to any person, including myself and participating child of which I am the legal guardian, or damage to any property which may arise from my voluntary participation in the Art and Soul Party Studio Art Camp/Classes and activities related to the Art and Soul Party Studio Art Camp/Classes incidental thereto.

Parent/Guardian Initials

EMERGENCY CARE

I authorize any representative of the Art and Soul Party Studio to have the participant treated in any medical emergency during their participation in activities of the Art and Soul Party Studio Art Camp/Classes. Further, the participant and/or parent/guardian agrees to pay all costs associated with medical care and transportation for the participant.

Parent/Guardian Initials

OUTDOORS ACTIVITIES

I give permission for my child to be escorted outdoors by Art and Soul Party Studio staff. I will ensure that my child is properly dressed for outdoor play, including but not limited to proper footwear and sunscreen. I understand that there are inherent risks associated with outdoor activities, including risk of serious injury or death.

Parent/Guardian Initials

PHOTOGRAPHY RELEASE

During activities, the participant's photograph may be taken and used for promotional purposes. The names of children and youth participating in activities will NOT be released in any promotional materials. I agree that my child/children's likeness may be used by the Art and Soul Party Studio for promotional purposes. Furthermore, I agree that I will NOT receive financial compensation for the use of my child/children's likeness in such promotional materials.

Parent/Guardian Initials

PARTICIPANT BEHAVIOR AND DISMISSAL

In consideration of all participants, I agree that the Art and Soul Party Studio reserves the right to dismiss my child from participation in part or all of the Art and Soul Party Studio programs due to inappropriate or disruptive behavior. I have read the Art and Soul Party Studio’s Camp/Class Policies and am familiar with the list of “unacceptable” behaviors; I will reinforce those rules with my child/children. Furthermore, I understand that if my child is dismissed for any reason I am NOT entitled to any refund or compensation whatsoever.

Parent/Guardian Initials

SEVERABILITY

I agree that, should any provision or aspect of this Agreement be found to be unenforceable, that all remaining provisions of the agreement remain in full force and effect.

Parent/Guardian Initials

ASSURANCES AND CONSENT

I CERTIFY THAT I AM THE LEGAL GUARDIAN OF: _____
_____ (participant(s) name(s)) AND THAT I HAVE READ ALL OF THE ABOVE INFORMATION AND CONSENT TO ALL OF THE FOREGOING PROVISIONS.

Parent/Guardian Signature: _____

Date: _____

Printed Name: _____

Relationship to Participant: _____