

KIDSWORK CHILDREN'S MUSEUM EMERGENCY AND RELEASE FORM

Last Name: _____ First Name: _____

Gender: Male Female Date of Birth: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Email: _____

Mother's Name: _____ Cell Phone: _____

Father's Name: _____ Cell Phone: _____

Authorized persons, other than parents, who may be called in an emergency and/or pick up the child from the program. (All authorized persons must be 18 or older and will require to show identification)

Name: _____ Relationship: _____ Phone #: _____

Name: _____ Relationship: _____ Phone #: _____

Name: _____ Relationship: _____ Phone #: _____

Please list anyone who DOES NOT have authorization to pick up your child:

Name: _____ Relationship to Child: _____

Are there any custody/divorce or other family concerns that the staff should be alerted to? YES NO

If yes, please explain: _____

READ CAREFULLY:

Please read this form carefully and be aware that, in signing up and participating in KidsWork Children's Museum programs, you will be waiving and releasing all claims for injuries, arising out of these programs, that you or the other names participants might sustain. The terms "I", "me" and "my" also refer to parents or guardians as well as participants in the programs. In registering for these programs, you are agreeing as follows. As a participant in these programs, I recognize and acknowledge that there are certain risks or physical injury, and I agree to assume the full risk of any injuries, damages or loss which I may sustain as a result of participating, in any manner, in any and all activities connected or associated with such programs. I agree to waive & relinquish any and all claims I may have as a result of participating in these programs against the KidsWork Children's Museum any and all other participating or cooperating governmental units, any and all independent contractors, officers, agents, servants and employees of the governmental bodies and independent contractors, and any and all other persons and entities, of whatever nature, that might be directly or indirectly liable for any injuries that I might sustain while participating in these programs. I do hereby fully release and discharge the KidsWork Children's Museum and the other released parties from any and all claims for injuries, damage or loss which I may have or which may accrue to me on account of my participation in these programs. I further agree to indemnify, hold harmless and defend the KidsWork Children's Museum any and all other released parties, from any and all associated with my conduct and the activities of these programs. I further understand and agree that the terms such as "participation", "programs", and "activities", referred to in this Agreement, include all exercises and physical movements of any nature while I am participating in these programs and further include the provision of or failure to provide proper instructions of supervision, the use and adjustment of any and all machinery, equipment, and apparatus, and anything related to my use of these services, facilities, or premises involved in these programs, and transportation to and from any events. I understand the nature of these programs for which I am registering, and have read and fully understand this Waiver, Release and Hold Harmless Agreement. I further understand that any advisements or warnings of the particular risks of these programs that I subsequently receive will be incorporated by reference into and become a part of this Agreement.

PARENT or GUARDIAN must sign and date: _____

Photographs and Video Consent, Waiver, Indemnity and Release

Photographs, Videos and Recordings

For and in consideration of good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged;

I hereby grant permission to KidsWork Children's Museum and its representatives to take photographs or videos of me and/or my child(ren) to make recordings of my and/or their voice.

I further grant to KidsWork Children's Museum and its representatives the right to reproduce, use, exhibit, display, broadcast, distribute and create derivative works of these images and recordings in any media now known or later developed as well as my/their name for promoting, publicizing or explaining KidsWork Children's Museum and its activities and for administrative or educational purposes. I acknowledge and specifically agree that KidsWork Children's Museum shall own all rights to the images and recordings.

Waiver, Indemnity and Release

For and in consideration of additional good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged;

I hereby waive any right to inspect or approve the use of the images or recordings or of any written copy. I also waive any right to royalties or other compensation arising from or related to the use of the images, recordings, or materials now or in the future.

I hereby release, defend, indemnify and hold harmless, KidsWork Children's Museum, its Board of Director's, officers, employees or agents from and against any claims, damages or liability arising from or related to the use of the images, recordings or materials, including but not limited to claims of defamation, invasion of privacy, or rights of publicity or copyright infringement, or any misuse, distortion, blurring, alteration, optical illusion or use in composite form that may occur or be produced in taking, processing, reduction or production of the finished product, its publication or distribution.

I am 18 years of age or older and I am competent to contract in my own name. I have read this document before signing below, and I fully understand the contents, meaning and impact of this consent, waiver, indemnity and release. This consent, waiver, indemnity and release shall be binding on me, my heirs, executors, administrators and assigns.

Signature (if age 18 or older), Date

Signature of Parent/Guardian (if under age 18), Date