

Bijou Theatre Acting Camp Waiver and Medical Release Form

Dear Parents or Guardians,

Thank you for signing up for the 2019 Bijou Acting Camps! We are committed to offering your child high quality acting instruction along with a safe environment. While the camp instructors and the Bijou staff and will do everything within reason to protect your child against injury, injuries may occur. By signing the form below, you are stating that your child is in good physical health and that you understand all of the information below.

I, the undersigned, hereby release and forever discharge any and all rights and claims for the damages, including any claims, for loss, damages or injury to my child or my child's property arising out of participation in the Bijou Acting Camps, or the respective officers, agents, representatives, successors and/or assignees of the parties named above, from any and all claims, demands and liability of every kind and nature, legal or occasioned by or arising out of my child's participation in the Bijou Acting Camps. I recognize the challenges of the materials, activities, and projects in which my child has chosen to participate and my child assumes all risks of personal injury or even death in connection therewith. I attest that my child is sufficiently physically fit to participate safely therein, and that a qualified medical person has not advised you otherwise. I have read the previous paragraph and I agree that I shall be bound by its terms and conditions. Furthermore, I hereby release instructors, staff, officers, employees, agents, and representative from any and all claims which may accrue to me arising out of or in connection with the participation of my child in the Bijou Acting Camps. I, the undersigned, for ourselves, our heirs, executors and administrators waive, release and forever discharge the instructors and the Bijou's affiliated staff, officers, employees, agents, representatives, successors and assigns of and from any and all rights and claims for damages to person or property while at the camp site. I release, waive, discharge, and covenant not to sue the instructors and Bijou staff, its affiliated clubs, its staff, officers, employees, agents, and representatives (hereafter referred to as "releases") from demands, losses on account of injury including death or damage to property, caused or alleged to be caused in whole or part by the negligence of the releases or otherwise.

By signing below, I have read and understand the above information and hereby give permission for my child to participate in the Bijou Camp. Also, I hereby give permission, in the event of an accident or medical emergency, to camp directors and/or appropriate emergency medical and hospital staff to provide necessary first aid and medical treatment to my child in my absence including transportation to a medical facility.

Camper's Name _____

Signature of parent/legal guardian _____ Date _____

Print name of parent/legal guardian _____

Relationship to participant _____