



Student Medical & Liability Waiver

Student's Full Name: _____

Student's Date of Birth: ___/___/___ Grade _____ School _____

Guardian Name: _____ Guardian Email: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Emergency Contact Information

First Contact: _____

Relation to Student: _____ Phone Number: _____

Second Contact: _____

Relation to Student: _____ Phone Number: _____

Please describe any medical or behavioral concerns, allergies or physical conditions that may affect your child's participation in class about which you would like us to be aware:

Mandatory Release of Liability and Hold Harmless: I certify that I am a legal guardian of the program participant named above and hereby give permission that the above mentioned student may participate in The Green Room's 2018 after-school program. I am aware that my child will be involved in the normal hazards of theatrical activities. In consideration of acceptance of this application, intending to be legally bound, hereby, for ourselves, our heirs, executors and administrators waive and release all rights and claims that may arise against The Green Room, and any persons affiliated with this camp. I give permission to the directors of The Green Room to provide and approve immediate and responsible emergency care and transportation should it be required. The Green Room reserves the right to dismiss campers without refund if either campers or parents interfere with the smooth operation of the program. I also authorize my son/daughter to participate in any athletic activities during The Green Room's after-school program. I understand that with any athletic or physical activity, my son/daughter may risk physical injury. I release any liability or responsibility with The Green Room and its instructors and counselors. The Green Room does not provide coverage through Workers' Compensation, and your own personal medical insurance is primary in case of bodily injury. The undersigned agrees to defend, indemnify and hold harmless The Green Room and its officers, employees, servants and agents thereof from any and all claims, suits or actions for injuries to persons, including death, and damage to property of others or of the undersigned that may arise from or result in any way from the operation of this Agreement.

Parent/Guardian Signature: _____ Date: _____