

Party Participant Waiver Form



Please distribute this waiver form to the parent/guardian of each child invited to your birthday party at S'more Studio. Guests must bring this form to be able to attend birthday party at S'more Studio.

I agree to allow my minor child to participate in S'more Studio Birthday Party activities. As a parent/guardian of the below child, I hereby assume any and all risks involved in connection with the Birthday Party activities. I hereby release S'more Studio, their employees, agents, representative, and assigns other individual or entity association with the operation of said Birthday Party for any harm, injury, or damage that may occur to the below named child as a result of his/her participation Birthday Party, whether foreseen or unforeseen including any risks or danger created from or harm caused by any negligent act or omission of any of the below mentioned parties. On behalf of my child, I indemnify and hold harmless the above mentioned parties from any claim for damages or injuries on the part of said minor child or his/her heirs, executors, or administrators, and to reimburse any loss damages, or costs that any of the above may have to pay as a result of such claim or related litigation by said minor child or anyone in his/her behalf and I hereby release, waive, and discharge any claim or cause of action that I may personally have as a result of any damage or injury or injury suffered by minor child(s).

I, _____ on behalf of the below minor, hereby give permission to any licensed physician and/or hospital to provide emergency medical treatment which may be necessary due to any injury accident incurred while participating in the Birthday Party. I agree to be responsible for all costs related to such medical treatments.

I hereby grant S'more Studio to take photographs, video recordings, and/or sound recordings of me during my visit. I grant the company permission to use the negatives, prints, motion pictures, video tapings, or any other reproduction of the same for promotional purposes on flyers, on the World Wide Web, or in any other manner deemed necessary.

I understand that this release is a contract. I expressly state that I have read, understand and am familiar with all its provisions and that I sign it of my own free will.

Signature of Parent/Guardian of Birthday Guest

Date

Print Name _____

Name of Guest: _____

Home Address: _____

Emergency Contact: _____

Telephone: _____

Email: _____