

Waiver and Release of Liability

In consideration of the risk of injury while participating in a 2017 PACE Youth Theatre (PACE) class and production (the "Activity"), and as consideration for the right to participate in the Activity, I, for myself, my heirs, executors, administrators, assigns, or personal representatives, knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation or the participation of any minor specifically identified below in the Activity, and do hereby release and forever discharge PACE Youth Theatre, their affiliates, managers, members, agents, attorneys, staff, volunteers, representatives, predecessors, successors, and assigns for any physical or psychological injury including, but not limited to illness, paralysis, death, damages, economical or emotional loss that I or any minor children specifically identified below may suffer as a direct result of participation in the Activity, including traveling to or from an event related to this Activity.

I AM PARTICIPATING IN THE ACTIVITY AND I AM PARTICIPATING THE ACTIVITY ENTIRELY AT MY OWN RISK AS TO MYSELF AND TO ANY MINOR CHILD SPECIFICALLY IDENTIFIED BELOW. I AM AWARE OF THE RISKS ASSOCIATED WITH TRAVELING TO AND FROM THE ACTIVITY AND THE ACTIVITY ITSELF, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN NEGLIGENCE, THE NEGLIGENCE OF THE MINOR CHILD OR CHILDREN SPECIFICALLY IDENTIFIED BELOW, THE NEGLIGENCE OF OTHERS, CONDITIONS RELATED TO TRAVEL, OR THE CONDITION OF THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN AND UNKNOWN TO ME, OF MY PARTICIPATION OR THE PARTICIPATION OF THE MINOR CHILD OR CHILDREN SPECIFICALLY IDENTIFIED BELOW, INCLUDING TRAVEL TO AND FROM AND PARTICIPATION IN THE ACTIVITY.

Having carefully read this Waiver and Release and fully understand it is a release of liability, I _____ give permission for my child(ren) listed below to participate in the 2017 PACE Youth Theatre (PACE) classes and productions. I give permission to the designated adult supervisor in charge to secure emergency medical treatment for my child(ren) under the same terms of liability waiver otherwise found in this document.

Child's name: _____ Date of Birth: _____

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