

Creativityalive arts

Permission and Waiver Form

Child's Full Name _____ Age _____

Home Phone # _____

Parent Name _____

Work Phone # _____ Cell Phone # _____

Parent Name _____

Work Phone # _____ Cell Phone # _____

Emergency Contact Name _____

Emergency Phone # _____

Mailing Address _____

Email Address _____

Allergies to food or art supplies? YES NO

If yes, please explain _____

Other Information that Creativityalive arts should know about the child:

Names of Persons Authorized to pick-up Child from Creativityalive arts

(Child will not be allowed to leave with any other person without written authorization from parent or guardian)

Name _____

Relationship _____

Name _____

Relationship _____

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DROP-OFF TIME : Please, NO drop-offs earlier than 10 minutes before your child class time

PICK-UP TIME : Please be ON TIME.

Photographs: Creativityalive arts is granted permission to use group or individual photographs or photo images taken during class for publicity or promotional purposes. Yes ____ No ____

Ability to engage in art activities and assumption of the risk:

Art studio activities, including but not limited to paints, glues, pastels, chalk pastels, pencils, wood/plaster tools, fiber (yarn/fabric/papers), wax, plastic bags, batik dye, incense, plaster, drawing and sculpting in nature, hiking, field trips, and playing experiences. I warrant that my child is able to follow directions for all activities in studio class. I acknowledge that risks from participation in class activities exist and that I have allowed my child to attend art class knowing these risks and their possible consequences including personal injury,

Waiver and Release of Liability

As a parent or guardian of my child, I agree that I will not hold Creativityalive arts liable for any personal injury, property damage or loss of insurance. I agree to release and hold harmless Creativityalive arts from all liability incurred as a result of my child's participation in studio class and that these terms serve as a release for myself, volunteers, property owners and members of my family.

I am the parent/guardian of the child—who is under 18 years of age—that I am registering for Creativityalive arts classes.

Print Name (Parent/Guardian) _____

Signature (Parent/Guardian) _____ Date _____