

**VOLUNTARY ACTIVITIES PARTICIPATION FORM
PERFORMING ARTS CENTER
WAIVER & RELEASE OF LIABILITY & INDEMNITY AGREEMENT**

I, _____, ("Participant") voluntarily wish to participate in **ESCAPE Theatre's Rehearsals & Performances of Matilda on June 15-22, 2026**, ("Performance"), to be held at the College of the Canyons Performing Arts Center I will not receive any compensation or other remuneration for my participation. In consideration for allowing me to participate in the User Organization's Performance and its Voluntary Activities, I acknowledge and agree to and/or represent the following:

I AM FULLY AWARE THAT THE VOLUNTARY ACTIVITIES MAY BE PHYSICALLY DEMANDING AND POSSIBLY DANGEROUS, AND HAVE A RISK OF SERIOUS INJURY OR DEATH. I HAVE HAD THE OPPORTUNITY TO ASK QUESTIONS OF PERSONS INVOLVED WITH THE PERFORMANCE AND THE VOLUNTEER ACTIVITIES AND HAVE SATISFIED MYSELF THAT I AM FULLY ADVISED OF THE INHERENT RISK AND HAZARDS INVOLVED. I HEREBY ACCEPT ANY AND ALL RISK OF INJURY AND/OR DEATH TO AND/OR OF ANY PROPERTY DAMAGE.

I hereby fully and completely waive, discharge and release any and all claims I may now or in the future have against the District, the College of the Canyons Foundation, the City of Santa Clarita, and/or any of their respective officers, directors, Board Members, trustees, employees, agents and/or representatives (individually and collectively, the "Released Parties") for injury, death or damage I may suffer, however caused, resulting from or in any way related to my participation in the Volunteer Activities and/or the Performance.

I further agree that I will not make a claim against or sue any Released Parties for any injury, death or damage I may suffer, however caused, as a result of my participation in the Voluntary Activities and/or the Performance.

I hereby indemnify (which means to compensate and to defend) the Released Parties from and against all actions, claims, demands, damages, costs and expenses, including attorneys' fees, in any way suffered by any of the Released Parties related to or arising from my participation in the Voluntary Activities and/or the Performance.

I expressly agree that this Waiver & Release is intended to be as broad and inclusive as permitted under California Law. I further agree that in the event any provision of this Waiver & Release is held to be invalid by any court, the remaining provisions will continue to be enforceable.

I agree that my agreements under this Waiver & Release are binding upon my heirs, executors, legal representatives, successors and/or assigns.

I HAVE CAREFULLY READ THIS WAIVER & RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT TO INDEMNIFY BETWEEN MYSELF AND THE RELEASED PARTIES, AND I SIGN IT OF MY OWN FREE WILL.

Signature of Participant **or, if Participant is a minor**, Parent/Guardian

Date

Print Name of Participant **or, if Participant is a minor**, Parent/Guardian

☐ Check Box if Participant is a Minor