



ESCAPE Theatre Studio Waiver Release of Liability & Indemnity Agreement

My child or teen voluntarily chooses to participate in rehearsals at the ESCAPE Theatre Studio.

I will not receive any compensation or other remuneration for my participation. In consideration for allowing me to participate at this studio, 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 to the ESCAPE staff or parent liasons involved with the rehearsals and activities, and I am satisfied that I am fully advised of any risks or 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 ESCAPE Theatre directors, staff, board members, or VBC Investors for injury, death or damage I may suffer, however caused, resulting from or in any way related to my participation in the volunteer activities in these classes.

I further agree that I will not make a claim against or sue any of the parties for any injury, death or damage I may suffer, however caused, as a result of my participation in the voluntary activities or classes at ESCAPE.

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 attorney fees, in any way suffered by any of the released parties related to or arising from my participation in the voluntary activities or classes.

I 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.

****Upon entering the premises and allowing my child to do so, I agree that I am assuming all risks involved. If my child or anyone from my family contracts any disease or virus that is either airborne or non-airborne, (example- Covid 19) I will not hold ESCAPE liable, and I release ESCAPE Theatre of any responsibilities regarding my health and well-being.**

*I agree that I will hold harmless **ESCAPE Theatre, it's Staff, or any of their affiliates**, against any, and all claims, lawsuits, demands, causes of action, liability, loss, damage, and/or injury for health-related risks associated with my participation.*

IF YOU ARE A NEW FAMILY- Please sign and date this form stating you have read the Studio Waiver & Release of Liability and understand and agree to its contents.

Print Participant's Name _____

Parent signature _____ Date _____