



YOUTH WAIVER AGREEMENT

FACILITY USERS UNDER 18 YEARS OF AGE MAY NOT PARTICIPATE WITHOUT THE SIGNATURE OF A PARENT OR GUARDIAN

For all facility users:

There is an element of risk inherent in participating in artistic processes, handling artistic materials and operating machinery. The Pennsylvania Guild of Craftsmen takes every precaution to ensure the safety of our facility users. Being an equipment-intensive facility, it is important for users to understand that this equipment can be dangerous if used improperly and/or without teacher supervision. The following general waiver must be signed in order to participate in any educational program at the Guild or to use the facilities as an independent study student.

In consideration of my participation in the educational programs and/or use of the facilities as a user, I hereby discharge and forever hold harmless the Pennsylvania Guild of Craftsmen, its Board, staff, volunteers, and all agencies whose property and personnel are used as part of the Guild's educational program and any sponsoring, co-sponsoring or funding agency(ies) or individual(s) for responsibility for any injury, illness, death, damage, loss, accident, delay or irregularity which may be occasioned for any reason whatsoever during the course of my participation. I certify that my child(ren) is physically able to participate in all the activities for which they are enrolled. We assume no responsibility for losses or additional expenses due to influences beyond our control.

I also give my permission for the Guild to use without limitation or obligation: photographs, film footage, tape or video recordings which may include my child's image or voice.

Student's Name:

Course Title & Date:

Emergency Contact:

Name: _____

Phone: _____

Alternative Contact Name: _____

Phone: _____

Please describe any medical concerns, allergies, physical, or behavioral conditions that your child may have which may affect their participation in this class.

How will your child come and go from class? Who will pick your child up?

Parent or Guardian Signature _____ Date _____