



Parental Permission and Release Form

I _____ as parent/legal guardian of _____ hereby give my consent for participation in programs with Ensemble Theatre Company, Ltd. I assume all risks and hazards incidental to participating, and do hereby waive, release, absolve, indemnify, and agree to hold harmless Ensemble Theatre Company, Ltd, their staff, volunteers, program location venue, and any sponsoring agency for any claim arising out of loss or injury that the participant might sustain while engaged in this program. I understand that insurance is not provided and that none of the sponsoring agencies are responsible for the medical condition of the participant listed in the space above.

In the event that I cannot be reached in an emergency, I give my permission to the physician selected by Ensemble Theatre Company, Ltd to hospitalize and secure proper measures of treatment for the child names above. Medical bills will be the responsibility of the parent/guardian named above. If my child has an allergy or medical condition, I understand that I must provide any specific written details and/or medications to Ensemble Theatre Company, Ltd prior to their first day of participation, and if I fail to do so, my child will not have access to them.

Rules for students are the same for everyone without regard to race, color, national origin, gender, or disability. I understand that all students will be treated as individuals and respect will be shown for a range of abilities and behaviors. The student agrees to abide by all the rules and regulations set forth by the Directors for the health, safety, and welfare of everyone. I understand that, in the event of an issue arising in this arena, the Directors will contact the parent/guardian. Also if there are concerns by the parent/guardian they should be brought to the attention of the Directors.

Photo Release

I _____ hereby authorize Ensemble Theatre Company, Ltd permission to use the image of my child _____ in photograph in any and all of its publications. I understand and agree that any photograph using my child's likeness will become property of Ensemble Theatre Company, Ltd and will not be returned.

I acknowledge that since my child's participation with Ensemble Theatre Company, Ltd is voluntary; I will receive no financial compensation.

I hereby authorize Ensemble Theatre Company, Ltd to edit, alter, copy, exhibit, publish or distribute these photos for purposes of publicizing Ensemble Theatre Company, Ltd's programs or for any other self-promotional and P.R. related, lawful purpose. In addition, I waive the right to inspect or approve the finished product, including written or electronic copy, wherein my child's likeness appears. Additionally, I waive any right to royalties or other compensation arising or related to the use of the photographs for these purposes. I understand that Ensemble Theatre Company, Ltd agrees not to sell any images of my child for use in commercial advertising or for sale to third parties.

I hereby hold harmless and release and forever discharge Ensemble Theatre Company, Ltd from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have reason of this authorization

Child's name: _____ Child's Age: _____

Parent/Guardian Printed Name: _____ Date: _____

Signature: _____

Ensemble Theatre Company, LLC Directors: Amy Collins - 303-883-0138 and Johanna Jaquith - 720-219-5571
6165 Ames St. Arvada, CO 80003

