Peninsula Youth Theatre

RELEASE FORM
MINORS & ADULTS

As consideration for my child (or children), as a cast member, or myself as a volunteer, being permitted by Peninsula Youth Theatre to participate in these activities, I hereby agree that I, my spouse, children, assignees, heirs, distributees, guardians, and legal representatives will not make a claim against, sue, or attach the property of Peninsula Youth Theatre, or any agent, employee, or member thereof, for injury or damage to my child (or children) or self, whether resulting from the negligent acts, or howsoever otherwise caused, as a result of our participation in **this activity.**

I hereby release Peninsula Youth Theatre and its agents, employees, and members from all actions, claims, or demands that I, my spouse, children, assignees, heirs, distributees, guardians, and legal representatives now have or may hereafter have for injury or damage resulting from my or my child's (or children's) participation in **this activity.**

Due to insurance requirements, PYT's liability and the safety of all children, including your own, parent volunteers need to avoid situations where they are left alone with a child other than their own except in emergencies. We take this policy seriously and therefore may ask volunteers to leave the production for failure to follow this policy. Thank you, in advance, for your cooperation.

I also understand that if I do any driving on behalf of PYT, to the theater, rehearsal studio, or to purchase items, I am responsible for bringing PYT a copy of valid automobile insurance prior to driving on behalf of PYT.

Please print the names of cast members and all participants who will do volunteer work for Peninsula Youth Theatre for this show. Your signature signifies your agreement with the conditions above.

Name: _____

Parent or Guardian - Please Print

Name: _____

Parent or Guardian Legal Signature **Date**

Cast Member Name: _____
Cast Member Name: _____
Cast Member Name: _____

Minor Volunteer Name: _____
Minor Volunteer Name: _____
Adult Volunteer Name: _____
Adult Volunteer Name: _____