

~ SAPC STUDIOS WAIVER OF LIABILITY ~

Print, complete, and return this form to SAPC Studios on or before February 8th, 2022.

Student _____ Age _____ Parent /
Guardian: _____

SAPC Studios Musical Theater Review Registration

This form must be completed by the student and their parents and be submitted on or before FEBRUARY 8TH, 2022. In order for student to participate in program, all forms must be filled out, signed, and submitted.

Parent/Guardian Permission & Waiver of Liability & Authorization for Emergency Care

I hereby give my consent for the above named student to participate in SAPC STUDIOS: MUSICAL THEATER REVIEW. I understand that SAPC cannot accept responsibility for personal items lost, stolen, or ruined.

I, hereby release St. Andrew's Presbyterian Church and its administrators, directors, and employees from any and all liability from property damage, personal injuries, or other claims arising from or in connection with my student's participation in SAPC Studios activities or events, including claims that are known and unknown, foreseen and unforeseen, future or contingent.

I authorize the Program Director, SAPC Staff, or adult volunteer in attendance at any SAPC activity to select and secure medical attention as may be necessary for my child as a result of an injury or other events requiring emergency care while I/we are not in attendance at such event.

I hereby release said employee(s) or volunteer(s) from any and all liability on account of such selection or authorization for any and all damages which occur on account thereof.

Parent/Guardian printed name: _____

Parent/Guardian Signature _____

Date: _____ Work Phone _() _____

Address: _____ City _____, Zip _____ Home

Phone: _() _____ Date _____

Student's date of birth: _____

Parent Signature _____

Date: _____ School Year: _____