



**Liability & Photo Release – Glass Camp**

Student's Name \_\_\_\_\_ Age \_\_\_\_\_

**Liability Release:** With regards to the student named above, I, the undersigned parent or legal guardian, do hereby release the Morean Arts Center Association, Inc. or any person or persons acting on its behalf from liability for any bodily injury sustained, or loss or damage of any personal article, while on the premises or participation in any activity sponsored by the Morean Arts Center Association, Inc. Furthermore, the undersigned agrees that in the event that medical attention is required due to accident or illness, the Morean Arts Center Association, Inc. shall be permitted to seek such medical services as it shall deem necessary and appropriate through EMS/911 and/or local hospitals.

I realize there are dangers inherent in glassblowing, glass working and other related activities and that mortal and serious personal injuries and property damage, including but not limited to physical exertion, cuts, burns, inhalation of hazardous substances, and/or exposure to visible and invisible radiation may occur through my child's participation in such activities.

Contact in case of emergency \_\_\_\_\_

Day tel. \_\_\_\_\_ Cell \_\_\_\_\_

Alternate contact \_\_\_\_\_

Day tel. \_\_\_\_\_ Cell \_\_\_\_\_

**Photo Release:** I hereby allow the Morean Arts Center to take photographs of my child/children to be used for Arts Center public relations and archival purposes only.

\_\_\_\_\_ yes      \_\_\_\_\_ no

**Camp Pick-up: All persons must show photo I.D. when picking up camper**

The following people have permission to pick up camper:

Parent/Guardian: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Car Make/Model/Color: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_