

## **Release from Liability & Indemnification (please read before signing)**

I certify that I am the parent or guardian of \_\_\_\_\_ and intend to enroll him/her in Carla's Art Camp for art instruction. On behalf of myself and my child I agree to waive and release Carla Funk and her art camp employees from and against any and all claims, cost liabilities, expenses, or judgments including attorney's fees and court costs arising out of my child's participation in Carla's art camp program or any illness or injury resulting therefrom except injury deliberately or willfully caused. I understand that if my child is injured this waiver will be used against me and any one else claiming damage because of my child's injury in any legal action. I agree that pictures/videos taken during program hours may be used for future promotional purposes and posted on the art camp website.

## **Medical Emergency Release**

In the event of sudden illness, accident or injury which may occur while said minor is engaged in activity supervised by Carla Funk and her art camp employees, when neither the parents, guardian or designated family physician can be contacted, I hereby give my consent pursuant to California Civil Code #25.8 for emergency treatment as shall be necessary under circumstances by any physician licensed under the Laws of the State of California and release and discharge Carla Funk or her art camp employees from any and all claims for personal injury.

**Parent and child are to discuss that good behavior and following the safety rules of art camp are important.**

**I certify that I have read and understand this waiver**

**Signature of parent or legal guardian \_\_\_\_\_ Date \_\_\_\_\_**