RUSTON COMMUNITY THEATRE PARTICIPATION WAIVER

Production Name Year	
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Production dates_____

Printed Name_____

I hereby release and hold harmless Ruston Community Theatre (RCT), and its respective officers, employees, agents, or representatives from any and all liability, claims, cost, expenses, injuries, illness, loss, or death resulting from, in whole or part, including attorney fees, for my participation in the Ruston Community Theatre production shown above, whether arising from the negligence of the above parties or otherwise.

I, the undersigned, am at least eighteen (18) years of age and have read this release form and understand all its terms. If I, the undersigned, am under the age of eighteen (18) years, my parent or legal guardian also shall state their having read, understood, and signed this release form and all its terms.

I also understand that pictures and videos of myself (and/or the participant), such as video interviews or photos during rehearsals, may be used for advertising purposes for RCT. I hereby agree to allow such materials to be published as RCT sees fit to advertise the production and for archiving purposes.

Date

Participant

Date

Parent or Guardian (if participant is less than 18 years)