

Participant Information:

Happy Hearts Studio

Customer Release, Waiver of Liability, Indemnification Agreement and Assumption of Risk

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Child's Name:	_
Date of Birth:	-
Parent/Guardian Name:	
Address:	
Phone Number:	
Emergency Contact:	
1. Acknowledgment of Risks:	

I, the undersigned, acknowledge that participation in activities at **Happy Hearts Studio** involves inherent risks, including but not limited to physical injury, illness, or emotional distress. This facility includes open play areas, gym equipment, and sensory play specifically designed for children with varying abilities, including but not limited to children with autism, ADHD, or other developmental disabilities.

While **Happy Hearts Studio** takes all reasonable precautions to ensure safety, I understand that certain risks cannot be fully eliminated. I voluntarily assume all such risks associated with my child's participation in the facility.

2. Waiver and Release of Liability:

In consideration of my child being allowed to participate at **Happy Hearts Studio**, I hereby waive, release, and discharge **Happy Hearts Studio**, its owners, operators, employees, volunteers, and any affiliated parties (collectively, "Releasees") from any and all liability, claims, demands, actions, or causes of action arising out of any injury, illness, or property damage my child may suffer while participating in any activity at the facility.

I understand and agree that this waiver of liability applies to injuries or damages of any kind, whether caused by negligence, equipment failure, or other factors.

3. Medical Emergencies:

In the event of a medical emergency, I authorize the staff at **Happy Hearts Studio** to seek appropriate medical attention for my child. I understand that **Happy Hearts Studio** does not provide medical insurance and that I am responsible for all medical expenses incurred during such emergencies.





4. Rules and Conduct:

I agree to comply with all rules and policies of **Happy Hearts Studio**, including behavior expectations and safety guidelines. I acknowledge that failure to follow these rules may result in the removal of my child from the facility without a refund. I further understand that Happy Hearts Studio has no responsibility to supervise children outside of organized activities.

5. Assumption of Responsibility:

I acknowledge that I am responsible for ensuring my child's understanding of appropriate behavior while at **Happy Hearts Studio**. I will also ensure that any behavioral, sensory, or medical needs my child has been communicated to the staff before participating in any activity.

6. Insurance:

I understand that **Happy Hearts Studio** does not carry any health or medical insurance for participants. I am fully responsible for providing adequate insurance coverage for my child in case of injury.

7. Photography and Media Consent:

I consent to the use of photographs, videos, or recordings of my child taken during participation in activities at **Happy Hearts Studio** for promotional or marketing purposes. I understand that these images may be used in media such as websites, social media, and printed materials.

8. Parent/Guardian Acknowledgment:

I certify that I am the parent or legal guardian of the above-named child and that I have the authority to sign this waiver on their behalf. By signing this agreement, I acknowledge that I have read, understood, and agreed to the terms and conditions set forth in this waiver.

Parent/Guardian Signature:	
Date:	
Witness Signature:	
Date:	

