

Art Camp Release Form

I hereby irrevocably and unconditionally waive, release, hold harmless, defend, indemnify and forever discharge j Elizabeth LLC, dba, The Happy Brush, it's employees, agents, officers, or members from and against any and all manner actions, liability, causes of action, claims, demands, punitive damages, Attorney's fees, equitable relief, claims for personal injury, emotional distress, and claims and demands or every other kind and nature whatsoever, known or unknown, which may accrue to or be asserted by me or any minor child of mine or in my charge arising directly or indirectly out of my minor child's participation in Art Camp at The Happy Brush.

I certify that I have read and understand all camp policies.

I certify that I understand that the Happy Brush will photograph campers in the course of creating their projects and that these photographs may or may not be used for marketing purposes. Images are the sole property of The Happy Brush and no compensation will be given in any form for use of these images. A written request must be presented no later than the first day of your child's camp session if you do NOT want their images to be used in print, online, or other marketing for The Happy Brush.

Date

Parent/guardian signature

Parent/guardian printed name

Camper Information

Camper name

age

grade in fall

Allergies and special considerations

Physician

If you, or the physician of your choice cannot be contacted, do you authorize a member of The Happy Brush staff to accompany your child to the nearest hospital or emergency care facility? **YES** **NO**

Parent name

cell phone

work phone

Additional emergency contact

relationship

phone number