

BUTTS ACTING GUILD
Liability & Media Release

Read Carefully – This Affects Your Legal Rights

1. Participant Information

I, _____ (“Participant”),
of _____ (City/State),
agree to the following terms in connection with participation in activities, rehearsals, performances, and
events conducted by Butts Acting Guild (“BAG”).

AND/OR

2. Parent/Guardian Consent (Required if Participant is under 18)

I, _____ (“Parent/Guardian”),
am the parent or legal guardian of the following minor participant(s):

3. Participant Policy Acknowledgment

I acknowledge that I have received, or have been provided access to, the Butts Acting Guild's policies governing participation in BAG activities.

I understand that these policies establish the expectations and standards of conduct for participants and include the procedures used by BAG to address concerns and, when necessary, disciplinary matters.

I agree to abide by these policies as a condition of participation in Butts Acting Guild activities and understand that failure to do so may result in disciplinary action, up to and including removal from a production or loss of participation privileges.

4. Assumption of Risk

I understand that participation in theatrical activities may involve risks, including but not limited to physical activity, set construction, props, costumes, lighting, and movement on stage or backstage areas.

I voluntarily assume all risks, whether known or unknown, associated with participation.

5. Release of Liability

I release, waive, and discharge Butts Acting Guild, its officers, directors, volunteers, and representatives from any and all claims, liabilities, damages, or causes of action arising out of or related to participation, including injury, illness, loss, or property damage, whether caused by negligence or otherwise.

6. Indemnification

I agree to indemnify and hold harmless BAG from any claims or damages arising from my actions (or the actions of the minor(s) listed above) during participation.

7. Responsibility for Damages

I agree to be financially responsible for any damage caused to facilities, equipment, or property due to negligent, reckless, or intentional actions by myself or the minor(s) listed above.

8. Medical Consent

In the event of an emergency, I authorize BAG to obtain medical treatment for me (or the minor participant), and I accept responsibility for any associated costs.

9. Photo & Media Release

I grant BAG permission to photograph, video record, and otherwise capture my (or the minor's) likeness and performance.

I authorize BAG to use these materials for promotional, marketing, archival, and educational purposes in any media format without compensation.

10. Acknowledgment

I acknowledge that:

- I have read and fully understand this entire document
- I understand that I am giving up certain legal rights
- I agree to be legally bound by all terms
- If signing for a minor, I have the legal authority to do so
- I am signing this agreement on my own behalf and, if applicable, as the parent or legal guardian of the minor(s) listed above. I agree to all the terms of this Release for myself and on behalf of such minors.

SIGNATURES

Participant Signature: _____

Printed Name: _____

Date: _____

AND/OR

Parent/Guardian Signature (if applicable): _____

Printed Name: _____

Date: _____

OPTIONAL (Recommended)

Emergency Contact Name: _____

Phone: _____