

Actor Training - Media/Medical Waiver

We are so pleased that your child will be joining us this summer in our Utah Shakespeare Festival Education Programs. In order for your child's participation, and by reason of their age, we ask that you please **print and sign** the authorization and waiver form below, and bring it with you on the first day of the camp. If you have any further questions concerning your child's registration, please contact our office at (435) 865-8333 or educationprograms@bard.org.

Media Release:

For consideration which I acknowledge, I grant to the Utah Shakespeare Festival and its assignees, licensees, successors and agents on behalf of the below-named minor (the "Minor) the transferable, irrevocable, sublicensable, perpetual, nonexclusive and worldwide right to use the image, video, name, photograph, voice, persona, likeness, or other personal identifying characteristics of the Minor in all forms of media now known or hereafter developed (collectively, the Minor's "Image") for such purposes as The Utah Shakespeare Festival deems appropriate. I, on behalf of the Minor and myself, waive the right to inspect or approve any material incorporating the Minor's Image, as well as the right to any royalties or other compensation for the use of the same. I also waive, on behalf of the Minor and myself, any claim to any intangible rights, including (but not limited to) the right of publicity or copyright, that I or the Minor may hold in any tangible medium of expression incorporating the Minor's Image created and/or used by The Utah Shakespeare Festival. In addition, I, on behalf of the Minor and myself, release The Utah Shakespeare Festival from any claims and/or liabilities arising out of or in connection with The Utah Shakespeare Festival's use of the Minor's Image. I represent that I am the parent or legal guardian of the Minor and I consent to foregoing on the Minor's behalf.

Medical Release:

I hereby authorize the directors of the Utah Shakespeare Festival Education Program to act for me according to their best judgment in any emergency requiring medical attention, and hereby waive and release the Utah Shakespeare Festival for any and all liability for any injuries or illnesses incurred by my child while at the Utah Shakespeare Festival. I will be responsible for any medical or other financial charges in connection with my child's attendance. I know of no other mental or physical problems that may affect my child's ability to safely participate in this program.

Student Name _____ Guardian Name _____

Parent Phone# _____ Parent Email _____

Alternate Emergency Contact _____ () _____
Name Relationship Phone #

Parent Signature _____ Date _____