

By signing this document you indicate that you understand the risks identified below.  
This is a stand-alone document, separate from any waiver provided by the group or organization, and should not be considered part thereof to any other document signed by you.

By signing this document, you will waive certain legal rights,  
Including the right to sue.

Name of Participant: \_\_\_\_\_

Address of Participant: \_\_\_\_\_

Date: \_\_\_\_\_

@ \_\_\_\_\_ y # u 7 7 /or  
participation in any activities including but not limited to: Theatre, Film, Production and/or Dance  
inherent risks. I am aware that while accessing and/or using the Facilities and/or participating in Activity(ies), I may be exposed to  
any manner of harm, injury, illness, death or personal property damage resulting from such risks, including but not limited to the  
following:

- a) Loss or damage of personal property by any means including, but not limited to, theft, vandalism, fire, or water damage;
- b) Loss, damage, injury, illness, death or expense that I may, or that members of my household(s) may suffer, including the contraction of a Communicable Disease as a result of my use of the Facilities and/or my participation in the Activity(ies).
- c)

