

Simple Gifts Productions



ACTING FOR KIDS REGISTRATION FORM

Participation Fee: \$30
(payable to Simple Gifts Productions)

Name _____

Address _____

Phone _____ Cell Phone _____

Parent/Guardian Name(s) _____

Age _____ Grade _____ School _____

PHOTO RELEASE: Unless we are informed otherwise, it is assumed that permission is granted to Simple Gifts Productions, Inc. to reproduce your child's appearance on its web site or in any future promotional materials.

LIABILITY RELEASE: It is understood that your child is participating in this activity at your own risk, and acknowledge that Simple Gifts Productions, Inc. has made no warranty or representation, expressed or implied, regarding the safety of conducting ACTING FOR KIDS. Furthermore, you agree to release Simple Gifts Productions, Inc., its officers, agents, directors, employees, licensees, successors and assigns from and for any and all claims, demands or causes of action of every nature on account of loss, cost, damage, or injury, incurred as a result of your child's participation in ACTING FOR KIDS.

By signing below, you acknowledge that you have thoroughly read, understand, and agree to the conditions stated above and associated with your child's participation in SGP's ACTING FOR KIDS. This release shall be binding upon you and your heirs, next of kin, executors, administrators and assigns.

Parent/Guardian Signature: _____

Date: _____