

RETTOR ENTERTAINMENT, LLC LIABILITY AND MEDICAL / PUBLICITY RELEASE FORM

*****INSURANCE & MEDICATION INFORMATION*****

While attending *any and all events, classes or rehearsals, produced by Retter Entertainment, LLC*, there is always the possibility of injury. *Retter Entertainment will* provide responsible care for my child, but, if some injury should occur, I, the undersigned agree not to hold *Retter Entertainment*, the owners, any of the chaperones, or any of its staff responsible. I further agree to indemnify and hold harmless *Retter Entertainment*, and its agents and employees from claim, losses, injuries, and damages of any nature whatsoever incurred. I further authorize the agents of *Retter Entertainment* to obtain any and all necessary emergency health care, in my stead, for my child.

BELOW IS REQUIRED:

MEDICAL INSURANCE FOR CHILD

(Insured Name) _____

(Carrier) _____

POLICY # _____

DOES YOUR CHILD HAVE A HISTORY OF ALLERGIES, PREVIOUS INJURIES, OR ANY OTHER MEDICAL PROBLEMS PERTINENT TO HIS/HER PARTICIPATION IN RETTER ENTERTAINMENT CLASSES, REHEARSALS OR EVENTS?

*****PUBLICITY RELEASE*****

Students of *RETTOR ENTERTAINMENT, LLC* automatically grant permission to *Retter Entertainment, LLC*. to use their photos and videos for advertising, publicity and distribution in any manner, inclusive of print advertising, educational videos, television, videotaping, or film broadcast in connection with but not limited to promotional campaigns.

(Participants Name) _____

(Parent or Legal Guardian Name) _____

(Parent or Legal Guardian Signature) _____

(Date) _____