

NGP Medical & Waiver Form

Student Name _____

Date of Birth _____ Current Age _____

Parent/Guardian Names & best way to reach you during class time:

_____ # _____

_____ # _____

Does your child have any allergies, or health concerns we should be aware of?

For minor accidents, may we administer herbal or homeopathic remedies? _____

Is there medication that your child will need during the class time? _____

Food preferences (vegan, gluten free etc) _____

What are your goals for your child with regards to this class?

Anything we should know about your child's:

Interests? _____

Special needs? _____

If you are homeschooling – would you be interested in a class summary or evaluation at completion of the class? YES NO MAYBE

I have read and agree to the WAIVER AND RELEASE OF LIABILITY YES

WAIVER AND RELEASE OF LIABILITY

~ As the parent or legal guardian of the student that I am enrolling into a NGP class or camp, I hereby certify that I have the legal right to sign of the minor's behalf.

~My child and our family will follow necessary Covid Protocols as laid out by NGP (including mask wearing and distancing when appropriate, and washing hands). I will keep my child home from class if he/she has a fever or is unwell in anyway.

~ I understand that among the activities that the child will be participating in at New Genesis Productions are physical activities involving dance, stage combat, often outdoors, and that injuries may occur.

~ In consideration for the privilege of the child's participation at New Genesis Productions, I hereby agree to assume the sole risk and responsibility for any and all injuries, damages or loss of any kind suffered by the child or any third person that may result from the child's participation in activities and use of the premises at New Genesis Productions, or at any other location.

~ I agree to waive any and all claims, lawsuits or causes of action that I, or the child, may have against New Genesis Productions, its instructors, the parents or legal guardians of other participating children. I further agree to indemnify and hold harmless New Genesis Productions, its instructors, students and the parents or legal guardians of minor students for any claims, lawsuits or actions that may arise out of the child's participation in activities at New Genesis Productions.

~ Additionally, I hereby state that the child does not suffer from any physical and/or mental condition which should preclude participation in the activities at New Genesis Productions and that neither I nor the child has been advised by any medical representative against the child participating in activities of this type and/or nature.

~ Photography Release

_____ I grant permission for NGP to use photos involving my child/children taken during camp for marketing and archival purposes.

_____ I request that my child NOT be photographed or used in any marketing or archival purposes.

By completing and submitting the registration form, I am certifying that I have read and understand this agreement in its entirety.

Signed _____ Date _____

