Art and Craft Workshop Tour Consent Form

Participant Information

Full Name
Date of Birth
Contact Number
Email Address
Emergency Contact
Name
Relationship
Contact Number
Consent Agreement
I hereby give my consent for participation in the Art and Craft Workshop Tour. I understand that reasonable measures will be taken to ensure the safety of all participants and that I will be notified in case of an emergency. I acknowledge and accept the risks involved in participation and agree to abide by all workshop rules.
I have read and agree to the terms above.
Medical Information
Medical Conditions / Allergies
Signature
Signature
Date