Art Workshop Participant Release Form

Participant Name:
Workshop Title:
Date:
Release and Waiver
I understand and agree to release the organizers, instructors, and venue from any and all liability, claims, or demands resulting from participation in the workshop, including any injury, loss, or damage that may occur.
Photo/Video Release
I grant permission to use photographs, videos, or recordings taken during the workshop for promotional or educational purposes.
Emergency Contact
Name:
Phone Number:
Participant Signature:
Date:
Parent/Guardian Signature (if under 18):
Date: