



MY ARCHITECTURE WORKSHOPS INC. & MY ARCHITECTURE WORKSHOPS SUMMER CAMP

RELEASE AND WAIVER OF LIABILITY, INDEMNITY, AND PHOTO/TALENT RELEASE AGREEMENT

In consideration for being permitted to utilize the facilities, services, and programs of the My Architecture Workshops Inc. and Summer Camp for any purpose, including but not limited to observation or use of facilities or equipment, or participation in any program affiliated with the My Architecture Workshops Inc. and Summer Camp, without respect to location, the undersigned, for himself or herself and any personal representatives, heirs, and next of kin, hereby acknowledges, agrees and represents that he or she has, or immediately upon entering or participating will inspect and carefully consider such premises and facilities or the affiliated program. It is further warranted that such entry into the My Architecture Workshops Inc. and Summer Camp for observation or use of any facilities or equipment or participation in such affiliated program constitutes an acknowledgement that such premises and all facilities and equipment thereon and such affiliated programs have been inspected and carefully considered and that the undersigned finds and accepts same as being safe and reasonably suited for the purpose of such observation, use, or participation.

My Architecture Workshops Inc. and Summer Camp conducts regular sex offender screenings on all members, participants, and guests. If a sex offender match occurs, the My Architecture Workshops Inc. and Summer Camp reserves the right to cancel membership, end program participation, and remove visitation access.

IN FURTHER CONSIDERATION OF BEING PERMITTED TO ENTER THE MY ARCHITECTURE WORKSHOPS INC. AND SUMMER CAMP FOR ANY PURPOSE, INCLUDING BUT NOT LIMITED TO OBSERVATION OR USE OF FACILITIES OR EQUIPMENT, OR PARTICIPATION IN ANY PROGRAM AFFILIATED WITH THE MY ARCHITECTURE WORKSHOPS INC. AND SUMMER CAMP, WITHOUT RESPECT TO LOCATION, THE UNDERSIGNED HEREBY AGREES TO THE FOLLOWING ON HIS OR HER BEHALF AND/OR BEHALF OF HIS/HER CHILDREN OR GUESTS (herein referred to as "the undersigned"):

1. PARTICIPANT CONDUCT

The undersigned agrees to abide by all rules and regulations of the My Architecture Workshops Inc. and Summer Camp (hereafter "My Architecture Workshops"), and I understand that failure to act in accordance with the rules may result in expulsion from the My Architecture Workshops and cancellation of participation.

2. PROPERTY LOSS

The undersigned understands that the My Architecture Workshops is not responsible for personal property lost, damaged or stolen while using My Architecture Workshops facilities or participating in My Architecture Workshops programs.

3. PHOTO/TALENT RELEASE

This sentence is a release of rights for a photograph or other artwork and projects that were created in connection with the My Architecture Workshops. It states that the person signing (the "undersigned") irrevocably releases, consents to, and allows My Architecture Workshops Inc., related programs, and its agents to use the photograph, likeness, and voice of the person signing as it pertains to my participation and in any manner for promotional efforts without the expectation of any reimbursement for its use. This release of rights means that the person signing gives up any claims or rights they may have to the photograph or artwork/project and that My Architecture Workshops is free to use it without any further permission or compensation. **(My initials here revoke photo/talent release_____).**

4. INSURANCE

The undersigned understands that the My Architecture Workshops does not provide any accident or health insurance for its members or participants and it is my responsibility to provide such coverage.



5. MEDICAL RELEASE

The undersigned authorizes the My Architecture Workshops, as my agent, to give consent to medical treatment by a licensed physician or hospital when such treatment is deemed necessary by the physician, and I am unable to give such consent. I authorize a qualified My Architecture Workshops staff member to administer CPR or first aid if necessary. I understand that it may be necessary for me to provide a release form from my physician regarding my current health status.

6. THE UNDERSIGNED HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the My Architecture Workshops, its directors, officers, employees, and agents (hereinafter referred to as "releasees") from all liability to the undersigned, his personal representatives, assigns, his or hers, and next of kin for any loss or damage, and any claim or demands therefor on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in, upon, or about the premises or any facilities or equipment therein, or participating in any program affiliated with the My Architecture Workshops, without respect to location.

7. THE UNDERSIGNED HEREBY AGREES TO INDEMNIFY AND SAVE AND HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in, upon, or about the My Architecture Workshops premises or in any way observing or using any facilities or equipment of the My Architecture Workshops or participating in any program affiliated with the My Architecture Workshops whether caused by the negligence of the releasees or otherwise.

8. THE UNDERSIGNED HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH, OR PROPERTY DAMAGE due to negligence of releasees or otherwise while in, about, or upon the premises of the My Architecture Workshops and/or while using the premises or any facilities or equipment thereon or participating in any program affiliated with the My Architecture Workshops.

THE UNDERSIGNED further expressly agrees that the forgoing RELEASE, WAIVER AND INDEMNITY AGREEMENT is intended to be as broad and inclusive as is permitted by the law of the State of Connecticut and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

THE UNDERSIGNED HAS READ AND VOLUNTARILY SIGNS THE RELEASE AND WAIVER OF LIABILITY AND INDEMNITY AGREEMENT, and further agrees that no oral representations, statements, or inducement apart from the foregoing written agreement have been made.

I HAVE READ THIS RELEASE

____/____/____
Date

Parent's or Legal Guardian's Signature