

2020 VIRTUAL SUMMER YOUTH ART PROGRAMS PARTICIPATION INFORMATION FORM

Personal Information

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Child's Name Age Date of Birth
Parent/Legal Guardian 1 Phone
Parent/Legal Guardian 2 Phone
Address
Alternate Phone work cell other
Additional Information:
Does your child have any special needs that we need to be aware of? Yes No
If yes, please explain in detail
Does your child have a behavior aide that will be present during camp? Yes No
Authorization for the Treatment of a Minor: I,, as (circle one) the parent/legal guardian of, a minor, have authorized my child to participate in The San Diego Museum of Art summer program. I will not hold The San Diego Museum of Art, its officers, employees, and/or agents, responsible for any damage arising from any injury that might be received while participating in activities of The San Diego Museum of Art summer programs.
Parent/Guardian Signature Date

THIS FORM MUST BE SIGNED BY A PARENT/LEGAL GUARDIAN OR YOUR CHILD WILL NOT BE ABLE TO PARTICIPATE IN OUR PROGRAMS.



Virtual Summer Programs 2020

Release of Liability, Assumption of Risk, Hold Harmless, Agreement to Indemnify and Not to Sue for Minors Participating in The San Diego Museum of Art Summer Camp/Teen Summer Studio

I hereby represent that I am the parent or legal guardian of the below named minor ("Minor") and have the legal right and authority to enter into this Release of Liability, Assumption of Risk, Hold Harmless, Agreement to Indemnify and Not to Sue for Minors Participating in The San Diego Museum of Art Summer Camp/Teen Summer Studio (the "Release") on my behalf as an individual and on behalf of, and binding upon, Minor.

I hereby give my consent for Minor to participate in ______ at The San Diego Museum of Art ("Museum") during the 2020 virtual summer camps/teen summer studios ("Summer Camps").

Individually, and as parent or legal guardian of Minor, I understand that the Minor's participation in the Summer Camps involves potential personal and property risks. Injuries may be serious or minor, including but not limited to: head or neck injuries, loss of sight, broken bones, brain damage, paralysis, and death.

I have read the previous paragraph and I know, understand, and appreciate these and other risks that are inherent in the Summer Camps.

I hereby certify that (1) I know Minor's state of health and physical and mental well-being, (2) that Minor is physically and mentally fit to participate in the Summer Camps, and (3) Minor has/will have health insurance while participating in the Summer Camps.

On behalf of myself and Minor, I hereby release and forever discharge The San Diego Museum of Art from any claim whatsoever I or Minor may have which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the Summer Camps.

I expressly acknowledge that I understand all policies, rules and regulations of the Summer Camps and I will ensure that Minor understands and agrees to abide by all policies, rules and regulations of the Summer Camps.

I, individually as parent or legal guardian of Minor and, to the extent permitted by law, on behalf of Minor, expressly assume all risks of injury and/or death associated with, arising out of or related to Minor's participation in the Summer Camps at the Museum. I expressly understand that Museum, its affiliates and any party contracting with the Museum assume no responsibility for the Minor's negligence or willful misconduct, or that of others.

I individually, as parent or legal guardian of Minor and, to the extent permitted by law on behalf of Minor, agree not to sue and agree to defend, indemnify and hold harmless the Board of Trustees of the Museum, its officers, employees, agents, representatives, volunteers, students, and employees

from and against any and all claims, damages, losses, and expenses, but not limited to, attorneys' fees and disbursements, judgments and settlements, asserted or suffered by any of them as a result of the Minor involvement in the Summer Camps and to reimburse them for any such expenses incurred.

I individually, as parent or legal guardian of Minor and, to the extent permitted by law on behalf of Minor, hereby release and discharge, and agree not to initiate or be a party to any legal action against the Museum, who through negligence or carelessness, might otherwise be liable to me, Minor, our respective heirs, personal representatives, relatives or assigns from all liability associated with, arising out of, or related to Minor's participation in the Summer Camps including all liabilities associated with and all claims that may be filed on behalf of or for the Minor.

I individually, as parent or legal guardian of Minor and, to the extent permitted by law on behalf of Minor, agree that this release of liability, assumption of risk, hold harmless, agreement to indemnify and not to sue is to be as broad and inclusive as is permitted by the laws of the State of California and that if any portion of it is held invalid it is agreed that the balance shall continue in full force and effect.

I understand that by signing this release of liability, assumption of risk, hold harmless, agreement to indemnify and not to sue, is legally binding on me, Minor, our respective heirs, personal representatives, relatives and assigns and that I am giving up both my and Minor's legal rights and remedies which otherwise would be available to me and/or Minor, our heirs, personal representatives, relatives or assigns against the Museum.

I have carefully read this release of liability, assumption of risk, hold harmless, agreement to indemnify and not to sue and fully understand it. I have explained the significance of this release of liability, assumption of risk, agreement to indemnify and not to sue to Minor. I am of legal age and voluntarily sign this release of liability, assumption of risk, hold harmless, agreement to indemnify and not to sue.

lease initial to indicate whether you are the parent or legal guardian of the Mind	or.
) Parent () Legal Guardian	
rint Minor's Name	
arent or Legal Guardian's Signature	
rint Name of Parent or Legal Guardian	
ddress	
elephone Number	
	



2020 Virtual Summer Youth Art Programs Photographic Release Form

The San Diego Museum of Art (the "Museum") occasionally uses photographs for educational purposes in print and non-print materials. We require an adult signature before publishing any images. If you agree to allow photographs of you and/or your child to be published in Museum materials, please complete the following. , hereby authorize the Museum, its affiliates and its agents, the absolute, unrestricted, perpetual, and irrevocable right and permission to copyright, publish, reproduce, exhibit, transmit, broadcast, televise, digitize, display, otherwise use, and permit other to use, (a) my or my minor child's (please print name) ____, name, image, likeness, and voice, and (b) all photographs, recording, videotapes, audiovisual materials, writings, statements, and quotations of or by myself or my minor child (collectively, the "Materials"), in any manner, form, or format whatsoever now or hereinafter created, including on the Internet, and for any purposes, including, but not limited to, advertising or promotion of the Museum, its affiliates, or their services, without further consent from me. It is understood that all of the Materials, and all films, audiotapes, videotapes, reproductions, media, plates, negatives, photocopies, and electronic and digital copies of the Materials, are the sole property of the Museum. I agree not to contest the rights or authority granted to the Museum hereunder. I hereby forever release and discharge The San Diego Museum, its officers, directors, employees, licensees, agents, successors, and assigns from any claims, actions, damages, liabilities, costs, or demands whatsoever arising by reason of defamation, invasion of privacy, right of publicity, copyright infringement, or any other personal or property rights from or related to any use of the Materials. I understand that the Museum is under no obligation to use the Materials. On behalf of myself and my minor child, I hereby waive any and all rights to control, inspect, or approve the photos for marketing use, and waive any right to receive any compensation for such use in any and all promotional and/or marketing efforts from the Museum. I have read the foregoing and fully understand the contents hereof. I represent that I am the parent/guardian of the minor named below. I hereby consent to the foregoing on his/her behalf. This release shall be binding upon me, my minor child, and my heirs, legal representatives, and assigns. Print Name Signature

THE PHOTOGRAPHIC RELEASE FORM IS OPTIONAL.

Date