

General Liability/Medical/Media Release Form
For every activity of 1 Liquid House
January 2011-December 2011

We (I) being 18 years of age or older, do for ourselves (myself) and for and on the behalf of my child/participant (if said child is not 18 years of age or older) do hereby release, forever discharge and agree to hold harmless 1 Liquid House and all staff, volunteers or other personnel from any and all liability, claims or demands for personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the child/participant that occur while said child/participant is participating in any 1 Liquid House event.

Furthermore, we (I) on behalf of our (my) child/participant (if under the age of 18 years old) hereby assume all risk of personal injury, sickness, death, damage and expense as a result of participation in recreation and other activities involved therein. Further, authorization, and permission is hereby given to said 1 Liquid House to furnish any necessary transportation, food and lodging for the participant.

The undersigned further hereby agree to hold harmless and indemnify 1 Liquid House, its directors, employees and agents, for any liability sustained by 1 Liquid House as the result of the negligent, willful or intentional acts of said participant, including expenses incurred attendant thereto.

Should an emergency situation arise, we/I hereby give our (my) permission to take said participant to a doctor or hospital and hereby authorize medical treatment, including but not in limitation to emergency surgery or medical treatment, and assume the responsibility of all medical bills, if any. Further, should it be necessary for the participant to return home due to medical reasons, disciplinary action or otherwise, we (I) hereby assume all transportation costs.

MANDATORY REPORTING REQUIRED

If 1 Liquid House has reasonable cause to know or suspect child abuse and neglect, we are required to report it to the appropriate authorities, according to Colorado statute 19-3-304 (1), (2), (2.5); 19-3-11.

Participant's Name: _____ Date of Birth _____ Grade _____

Address: _____ City: _____ Zip Code: _____

Parent's name and home phone number: _____ cell: _____

Medical Insurance: yes no Insurance Company Name: _____

Policy Number: _____

Physician's Name and Phone Number _____

Person to contact if parent can not be reached: _____

Allergies: _____ Other physical conditions that may inhibit participation _____

SIGNATURES (BOTH PARENTS MUST SIGN IF NOT SEPARATED/DIVORCED)

Father: _____ Date: _____

Mother: _____ Date: _____

Legal Guardian _____ Date: _____

1 LIQUID HOUSE MEDIA RELEASE FORM

I, _____ on behalf of _____ do hereby release 1 Liquid House to feature my child in the following ways and without compensation: Any Photos, Video Tape and/or Quotes in 1 Liquid House Media Publications and Website, Facebook and 1 Liquid House social network sites.

Signed: _____ Date: _____