

Waiver Agreement

There is an element of risk inherent in participating in the artistic processes, handling artistic materials, operating machinery, and breathing fumes and particles. The Borrego Art Institute/ThePottery takes every precaution to ensure the safety of our students, volunteers, and staff.

YES NO

Consideration of my participation in educational programs at the Borrego Art Institute/ThePottery, I hereby discharge and forever hold harmless the Borrego Art Institute/ThePottery, its board, staff, instructors and volunteers, and all granting agencies sponsoring, cosponsoring, or funding agencies or individuals, for responsibility for any injury, illness, death, damages, loss, accident, delay or irregularity which may be occasioned for any reason whatsoever during the course of my participation on the Borrego Art Institute/ThePottery premises.

YES NO

I understand the failure to abide by the policies and guidelines, as outlined by my instructor, may result in the cancellation of my usage privileges. I further understand the damage to equipment and/or the facility due to reckless acts, negligence, and/or deliberate indifference will be my financial responsibility.

YES NO

I give my permission for the Borrego Art Institute/ThePottery to use, without limitation or obligation, photographs, film footage, tape, or video recordings that may include my image, voice, or artwork to promote or interpret the pottery programs.

YES NO

I certify that I am physically able to participate in all activities for which I am enrolled; the Borrego Art Institute/ThePottery assumes no responsibility for losses or additional expenses due to occurrences beyond its control.

YES NO

Do you have any medical issues of which the instructor of the pottery staff should be aware of? If yes, please explain. _____

This waiver must be signed and agreed to in full participation in all ThePottery classes and programs. Contact Jill Sullivan with any questions or concerns.

Student Signature _____

If under 18, waiver must be signed by parent or guardian

Student Name _____

Address _____

Town and Zip Code _____

Email _____

Phone Number _____

Emergency Contact Name and Relationship _____

Emergency Contact Phone Number _____