

Party Permission Agreement

Please bring this completed and signed waiver with you on the day of the party.

Permission and Release Agreement:

I hereby authorize/consent myself and my child to participate in the above-named KIDCREATE STUDIO activities. I agree not to hold KIDCREATE STUDIO or its representatives responsible for any and all injuries sustained/suffered by the below-named participants during the activities. I also agree to waive any and all rights and claims for damages that I believe I may have against KIDCREATE STUDIO as a result of participation in the activities.

Child Name: _____

Child's Date of Birth: _____

Child Name: _____

Child's Date of Birth: _____

Date: _____

Parent/Guardian Signature: _____

Parent/Guardian Name (printed): _____

Address: _____

City: _____

State: _____ Zip: _____

E-mail: _____

Please add me to the Kidcreate mailing list.

Emergency Contact Phone # _____

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