

IF UNDER THE AGE OF 18, PLEASE COMPLETE THIS FORM!

Sacramento Children's Museum
Minor Volunteer Release/Parent Waiver Form

Image and Performance Release

I hereby grant to Sacramento Children's Museum the rights to use my image, and the image of my Minor Child Participant, interview/performance(s) or music for Museum exhibit displays, associated educational programs, and/or marketing and public relations.

Release from Liability

By signing this release, you waive your right, and the right of any Minor Child Participant you represent, to hold Sacramento Children's Museum (the "Museum") and its trustees, officers, employees, volunteers, independent contractors, representatives, and agents (the "Museum People"), liable for any injury or loss suffered by you or the Minor Child Participant during volunteer work with the Museum. This means that by signing this Release of Liability, you, and the Minor Child Participant you represent, give up the right to make demand upon the Museum and the Museum People for payment of any damages suffered by you or the Minor Child Participant during volunteer work with the Museum, whether such damages are caused by physical injury, loss of property, acts of a third party, or any other case whatsoever.

By signing this release, you agree to allow the Minor Child Participant you represent to volunteer inside of the Museum without a parent guardian present. You understand that the Museum is not responsible for the Minor Child Participant when they are volunteering alone at the Museum, but that their parent or guardian remains responsible for the Minor despite their on-site absence.

By signing this form, you agree to release the Museum from all liability pursuant to the paragraph above. If you also are the legal guardian of a Minor Child Participant, you represent that you and the parent or legal guardian of the Minor Child Participant and that you are acting in that capacity when you release the Museum and the Museum People, as set forth in this agreement, from any liability for any damage or injury suffered by the Minor Child Participant while participating in the Museum's volunteer program.

Printed name of Parent/Legal Guardian: _____

Signature of Parent/Legal Guardian: _____

Minor Child Participant's Name: _____

Date: _____

Sacramento Children's Museum is a 501C-3 non-profit.
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