

**LEE COUNTY CENTER FOR THE ARTS**  
**Program: Youth Improv Class**  
**Consent Form**

**Participant Information:**

Participant's Legal Name: \_\_\_\_\_ Age: \_\_\_\_\_  
Nickname: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**Parent/Guardian Information:**

Parent/Guardian Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Cell Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**Emergency Contact (if different than above):**

Emergency Contact Name: \_\_\_\_\_  
Emergency Contact Cell Phone: \_\_\_\_\_

**Liability Release:**

In consideration of Lee County Center for the Arts (LCCA) allowing the Participant to participate in the above theater class, I, the undersigned, do hereby release, forever discharge, and agree to hold harmless Lee County Center for the Arts, its directors, employees, volunteers, and agents (collectively referred to as "LCCA") from any and all liability, claims, or demands for accidental personal injury, sickness, or death, as well as property damage and expenses, of any nature whatsoever that may be incurred by the undersigned and the Participant while involved in the youth theater events.

I, the parent or legal guardian of this Participant, hereby grant permission for the Participant to participate fully in the Youth Improv Class at 115 W. Austin St., Giddings, Texas 78942. Furthermore, we assume all risk of accidental personal injury, sickness, death, damage, and expense as a result of participation in recreation and work activities involved with the youth theater class.

**Photo Release:**

We additionally give permission for the theater to publish photographs or videos of our youth on the theater website, social media, and in the theater newsletter.

\_\_\_\_\_  
(Parent/Guardian Signature)

\_\_\_\_\_  
Date