OCCT
ORANGE COUNTY CHILDREN'S THEATRE

ORANGE COUNTY CHILDREN'S THEATRE WORKSHOP REGISTRATION

Participant's Name: _____

Birth Date: _____ Age: _____ Grade: _____

Parent's Name: _____ Ph #:_____

Email:_____

Workshop:__FOOTLOOSE__
Date/Time: May 13th, 2026 from 6:00-8:00pm
Price: $30
Payment: Venmo @deanne-hemmens

PERMISSION SLIP/MEDICAL RELEASE FORM/WAIVER OF LIABILITY/COVID INDEMNIFICATION

I, the undersigned parent or legal guardian of_____, a minor, requests that he/she be permitted to participate with Orange County Children's Theatre. I have been advised of the rules, regulations, and expectations of the theater and agree to abide by them and to fulfill our obligations as required. If I have any questions regarding participation in this event I will ask a member of the Administrative Board of OCCT immediately and not wait for a problem to arise.
I will permit photographs and videos of my child taken at this event to be used for publicity and other purposes by authorization of the Administrative Board of OCCT.
Furthermore, I hereby authorize and consent to any x-ray examination, anesthetic, medical or surgical diagnosis rendered under the general or special supervision of any member of the medical staff and emergency room staff licensed under the provisions of the Medicine Practice Act or a dentist licensed under the provisions of the Dental Practice Act or the staff of any acute general hospital holding a current license to operate a hospital from the State of California Department of Public Health. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care being required but is given to provide authority and power to render care which the aforementioned physician in the exercise of his/her best judgment may deem advisable. It is understood that every effort shall be made to contact the undersigned prior to rendering treatment to the patient, but that any of the above treatments will not be withheld if the undersigned cannot be reached.
The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person-to-person contact. As a result, federal, state, and local governments and federal and state health agencies recommend social distancing and have, in many locations, prohibited the congregation of groups of people. Orange County Children's Theatre has put in place preventative measures to reduce the spread of COVID-19; however, OCCT cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending OCCT activities could increase your risk and your child(ren)'s risk of contracting COVID-19. By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that my child(ren) and I may be exposed to or infected by COVID-19 by attending OCCT activities and that such exposure or infection may result in personal injury, illness, permanent disability, or death. I understand that the risk of becoming exposed to or infected by COVID-19 at OCCT may result from the actions, omissions, or negligence of myself and others, including, but not limited to, OCCT staff, volunteers, and program participants and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury to my child(ren) or myself (including, but not limited to, personal injury, disability, or death), illness, damage, loss, claim, liability, or expense, of any kind, that I or my child(ren) may experience or incur in connection with my child(ren)'s attendance at OCCT activities ("Claims"). On my behalf, and on behalf of my children, I hereby release, covenant not to sue, discharge, and hold harmless OCCT, its staff, employees, agents, and representatives, of and from the Claims, including all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto. I understand and agree that this release includes any Claims based on the actions, omissions, or negligence of OCCT, its staff, employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any OCCT activity. I am also acknowledging receipt of OCCT's Covid-19 In-person Rehearsal and Performance Guidelines, as provided in the parent information packet.

In consideration of acceptance of my child's registration for this activity, I hereby agree to indemnify and hold harmless Orange County Children's Theatre, its officers, administrative board, trustees, employees, and volunteers from any liability, claim, or action for damages resulting from, or in any way arising out of the participation in the activity listed above by my child. This authorization is to remain in effect during the time of enrollment in the activity listed above unless revoked in writing.

_____ _____ ____/____/____
Parent's or Legal Guardian's Name (**Print**) Parent's or Legal Guardian's **Signature** **Date**

Allergies (if none, please write NKA): _____

Emergency Contact: _____ Phone #: _____