

Emergency Release (required)

I hereby consent to have my child attend Rebel Art School classes, camps, and workshops and not hold Rebel Art School or its agents liable of any accidents, physical or other injury from any and all claims, demands, costs, expenses, and compensation. In case of an emergency, I also give permission to Rebel Art School and its agents to obtain medical and/or dental care prescribed by a duly licensed physician (MD), osteopath (DO), or dentist (DDS) for my child. This care may be given under whatever conditions necessary to preserve the life, limb or well-being of my child. I agree to these terms freely and voluntarily without inducement for myself and on behalf of my child.

Media Release (required)

I hereby grant agents of Rebel Art School a perpetual, non-exclusive license to make, use, or have made copies of my child's artwork, my child's voice, or my child's image and/or that of the named minor which may be captured through video, photo, digital camera or other media for Rebel Art School training and promotional material and publications. With my acceptance of these terms, I acknowledge that I have read this document and understand its contents and release any and all claims and demands resulting from their use in training and promotional purposes.