Liability Waiver and Release

----PI FASE READ BEFORE SIGNING----



ARTISTICENTERTAINMENTSERVIC
Name:
Birthdate:
Date:
Shift:
By signing this registration form, I confirm that I am over 18 years of age and wish to participate as a volunteer at Artistic Entertainment Services ("AES") to decorate floats.
In consideration for being permitted by AES to participate as a volunteer, I hereby agree that I will not sue, attach the property of, or otherwise pursue a claim against AES (or its Officers, Employees, Agents or Contractors) for any death, personal injury or property damage; whatever the cause or place of the occurrence giving rise to the claim, which I may suffer or sustain as a result of or in connection with my participation as a volunteer. In addition, I hereby release and discharge AES (and its Officers, Employees, Agents or Contractors) from all actions, claims or demands I now have or may hereafter have for any death, personal injury, expenses, or property damage arising out of or in connection with my participation as a volunteer.
This Liability Waiver and Release is intended to discharge in advance, AES (and its Officers, Employees, Agents or Contractors) from and against any and all liability arising out of or connected in any way with my participation as a volunteer; even though that liability may arise out of negligence on the part of AES (or its Officers, Employees, Agents or Contractors).
I also understand and accept that AES provides no medical insurance covering activities I undertake as a volunteer, and I agree to assume the risk of any injury, death, or loss of property related to said participation as well as that of any minors who are my dependents. I agree to make no claims, and waive any and all claims, against AES, its employees, agents, and volunteers, for any injury, damages, expenses, or other incidents, arising from my activities as a volunteer, however caused, other than claims for gross negligence, willful misconduct, or violation of law.
I and my dependent(s) are physically able to participate in this activity. I consent to any medical treatment that I or my dependents need(s) while involved in this activity, and I agree to cover all costs for any such necessary medical treatment.
I hereby consent to the use of my image and likeness and that of my dependent(s) to appear in any video and photography taken for promotional purposes, as well as any other lawful purpose.
I hereby acknowledge that an inherent risk of exposure to COVID-19 exists in any place where people gather. COVID-19 is an extremely contagious disease that can lead to severe illness and death. I assume all risks, hazards, and dangers arising from or relating in any way to the risk of contracting a communicable disease or illness-including, without limitation, exposure to COVID-19 or any other bacteria, virus, or other pathogen capable of causing a communicable disease or illness, whether that exposure occurs before, during, or after the event, and regardless of how caused or contracted-and I hereby waive any and all claims and potential claims against Artistic Entertainment Services; AES Creative; Pasadena Tournament of Roses Association; City of Pasadena; or any of the contractors, or volunteers liable for any illness or injury.
By signing this document, and accepting this waiver, I confirm that I am 18 years of age or older, that I have fully read this registration form, and that I understand and agree to all of its provisions. I also understand that my acceptance and agreement to the terms detailed herein is a condition of my participation in any and all volunteer activities for Artistic Entertainment Services. I also understand that my volunteer services may be revoked, and I may be asked to leave the premises. I further understand and accept that any participants aged 12-17 must have a parent or legal guardian review and agree to all said provisions and sign on their behalf. It is understood and agreed that this Liability Waiver and Release is binding on my heirs, beneficiaries, guardians, legal representative, or assigns.
I HAVE READ THIS AGREEMENT CAREFULLY AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A WAIVER AND RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND AES, AND I SIGN IT OF MY OWN FREE WILL. Name of person (Group) you signed up under (if applicable):
Signature:

Parent/Guardian Signature:_