I, ________________________________________ give consent for my child, 
________________________________________, to participate in the ArtistsDRIVEN! Workshop scholarship program. 
_______ (initial here)

I hereby acknowledge that while the workshops being led by professionals are generally regarded as safe, that allergies, or reactions to products (including, but not limited to: alginate, plaster, paint, wood, chemicals, etc.), the use of sharp/dangerous tools (including, but not limited to: casting materials, metals, carving knives, etc), and mistreatment of products and tools by my child can result in injury. 
_______ (initial here)

I have carefully considered all risks involved in this activity and program, and hereby agree to hold the Norfolk Arts Center their respective employees/participants harmless for all personal injury to which could result from participation in this service. ________ (initial here)

I hereby acknowledge that all used products and materials will be chosen and purchased as safely as possible. Any skin condition, allergies, or reasons a product or tool should not be used by my child will be reported by myself to the instructor prior to use. ________ (initial here)

I understand that the Norfolk Arts Center and their respective employees and or participants are not held responsible for complications that may result from the workshops after leaving the facility (including, but not limited to: allergic reactions, failure to clean off products used, injuries, etc.). 
_______ (initial here)

I hereby agree that the Norfolk Arts Center may use on it’s website – and/or in any brochure, flyers, social media or other advertising it deems necessary - all photographs, video, audio, and any other digitally or chemically stored media that is captured or recorded by the Norfolk Arts Center and any and all of their employees or participants. ________ (initial here)

Legal Guardian’s Name ________________________________________________________

Child’s Name ________________________________________________________________

E-mail Address __________________________________________________________________

Phone Number _____________________________ Date ____________________________

Legal Guardian’s Signature _____________________________________ Child’s Signature_________________________