

WASHINGTON PERFORMING ARTS SUMMER CAMPS PARTICIPANT AGREEMENT

My child, 

(PLEASE PRINT NAME OF CHILD)

has my permission to participate in Washington Performing Arts Summer Camps. Permission is hereby given for the Washington Performing Arts Summer Camps Participant to participate in all activities and any associated travel requiring commercial transportation obtained by Washington Performing Arts for the duration of the workshop dates. In consideration of the benefits and opportunities afforded the Washington Performing Arts Summer Camps Participant through participation in these activities, the undersigned parent or guardian agrees his/her child will abide by the following policies and agrees to the following permissions:

❖ ETIQUETTE

Any Washington Performing Arts staff member, camp director, or instructor in charge can dismiss a camp participant if he/she exhibits disruptive behavior (i.e., excessive talking or profanity, disrespectful conduct, lack of attention or uncooperative behavior during rehearsals, etc.). The Washington Performing Arts Summer Camps participant cannot return to the next scheduled session until the participant agrees to correct such behavior. If the problem persists, dismissal from the Camp will result. There will be no refunds of application fees should a participant be dismissed.

❖ IN CASE OF A MEDICAL EMERGENCY

I authorize Washington Performing Arts full-time or contracted staff, in the event I am unavailable, to obtain emergency medical treatment for the Camp participant in the event of an injury or illness during any scheduled performance or workshop activity (including rehearsals or travel related to a performance or other activity). The name of the emergency contact person has been listed on the online camp registration, along with food and drug allergies and existing medical conditions and medications. I agree to pay for any costs associated with the medical emergency.

❖ PHOTO/VIDEO RELEASE

I give permission to Washington Performing Arts, camp facilities, its partner agents, and employees to record or photograph my child as a member of the Washington Performing Arts Summer Camps throughout the course of the workshop and related activities. I recognize that neither I nor my child will be compensated for such photography. Such photographs or recordings will be used for archival, educational, social media, or publicity purposes.

❖ TRANSPORTATION

Transportation to and from all camp sessions and performances is the sole responsibility of the participant.

In the event of an activity at which time the Camp participant is being transported in commercial transportation arranged or provided by Washington Performing Arts and an injury occurs, I understand that I shall look to the commercial carrier or owner of the leased or rented vehicle to pay all other damages of any kind and any medical bills incurred as a result of such an injury and shall release Washington Performing Arts, camp facilities, and any other facility utilized for rehearsal/performance or other activity, including their agents, employees, adults and parent representatives from liability.

In the event of extraordinary and unanticipated circumstances, where the camp participant may voluntarily be transported, by means arranged or provided by Washington Performing Arts, including riding in a private automobile, during which the participant is involved in an accident while in route to or from any scheduled performance and/or activity, I understand the participant is covered under my family automobile policy and I agree to submit all claims including all medical bills incurred to my insurance company for payment. If my policy has been issued with a deductible clause relative to the personal injury protection, I understand that I have assumed that deductible amount when I purchased the policy. Washington Performing Arts Society, camp facility, or any other facility utilized for rehearsal/ performances and field trips including their agents and employees will not be responsible for my deductible, nor primary coverage, nor any out-of-pocket costs. I further understand that my family policy may not cover such an accident. In any and all events, I hereby release Washington Performing Arts, camp facility, or any other facility utilized for rehearsal/ performance or activity, including their agents, employees, adults and parent representatives from liability arising from, resulting from, and/or relating to such an accident.

❖ LATE PICK-UP FEE

All camp participants must be picked up on time at the end of each camp day. Washington Performing Arts staff, camp faculty, or venue, including their agents, employees, adults and parent representatives **are not responsible** for any child who remains at the camp site **after 4:45pm. I agree to pay \$5 per day per child** if I have not picked up my child or children by 4:45pm.

❖ FORCE MAJEURE

Act of God: This agreement and the obligation of Washington Performing Arts /camp facility are subject to conditions beyond its reasonable control such as illness, accidents or delays in Washington Performing Arts transportation or otherwise, failure of instrument or equipment, public emergency, fire, flood strikes, riots, etc. If the presentation of any activity of Washington Performing Arts is prevented for any of the above reasons, Washington Performing Arts /camp facility shall not be under any obligation to compensate the other for any services or expenses incurred in connection with such activity.

❖ INSURANCE

Except for Washington Performing Arts staff, Washington Performing Arts is not responsible for procuring any such insurance coverage of Washington Performing Arts Summer Camps participants. **This includes but is not limited to all forms of general liability, and or medical insurance.** On behalf of the Washington Performing Arts Summer Camps, the participant, discharges and releases Washington Performing Arts /camp facility, its partners, and their respective trustees, directors, officers, employees and agents from any and all liability for illness, injury, loss, damage, obligation, or penalties which may be sustained in connection with participation in this project.

❖ ARBITRATION

1. Any claim, controversy, dispute or question arising out of or in connection with the validity, interpretation, performance or non-performance of this Agreement, or breach thereof, shall be determined and settled by binding arbitration before a single arbitrator in accordance with the current rules of the American Arbitration Association, and judgment upon any award rendered may be entered in a court of competent jurisdiction. All parties to this Agreement are bound by this obligation to arbitrate disputes and the final judgment is binding on the parties.
2. This Engagement Agreement shall be governed by and construed in accordance with the laws of the District of Columbia without giving effect to the principles of conflicts thereof. This constitutes the sole, complete and binding Agreement between the parties hereto. This Agreement may not be changed, modified, or altered except by an instrument in writing signed by the parties.

❖ MISCELLANEOUS

1. All notices to Washington Performing Arts shall be in writing addressed to:
Washington Performing Arts 1400 K Street N.W.,
Suite 500, Washington, DC 20005.
2. Except as noted above under Photo/Video Release, Washington Performing Arts does not permit and will prevent the broadcasting, recording, photographing or any other transmission or reproduction of the performance(s) or any part thereof by any means or media now or hereafter known, except for news review footage authorized in advance by Washington Performing Arts.
3. This constitutes the sole, complete and binding Agreement between the parties hereto. This Agreement may not be changed, modified or altered except by an instrument in writing signed by the parties. Signed agreement should be returned to **Washington Performing Arts** at the above address as soon as possible.

SIGNATURE OF PARENT/GUARDIAN

DATE

*On behalf of herself or himself,
and as agent for and on behalf of the camp participant*

SIGNATURE OF MICHELLE HOFFMANN

DATE

Director of Education
Washington Performing Arts