

RELEASE OF LIABILITY, ASSUMPTION OF RISK, AND MEDICAL WAIVER

The individual named below (referred to as "I" or "me") desires to participate in field trips, workshops, and other activities (whether singular or plural, hereinafter referred to as the "Activities") provided by Pink Parrot Productions LLC, a California limited liability company (the "Company"). As lawful consideration for being permitted by the Company to participate in the Activities, I agree to all the terms and conditions set forth in this agreement (this "Agreement").

I AM AWARE AND UNDERSTAND THAT THE ACTIVITIES ARE DANGEROUS ACTIVITIES AND INVOLVE THE RISK OF SERIOUS INJURY AND/OR DEATH AND/OR PROPERTY DAMAGE. I ACKNOWLEDGE THAT ANY INJURIES THAT I SUSTAIN MAY BE COMPOUNDED BY NEGLIGENT EMERGENCY RESPONSE OR RESCUE OPERATIONS OF THE COMPANY. I ACKNOWLEDGE THAT I AM KNOWINGLY AND VOLUNTARILY PARTICIPATING IN THE ACTIVITIES WITH AN EXPRESS UNDERSTANDING OF THE DANGER INVOLVED AND HEREBY AGREE TO ACCEPT AND ASSUME ANY AND ALL RISKS OF INJURY, DEATH, OR PROPERTY DAMAGE, WHETHER CAUSED BY THE ORDINARY NEGLIGENCE OF THE COMPANY OR OTHERWISE. FURTHER, IF I AM ENTERING INTO THIS AGREEMENT AS A GUARDIAN OF A MINOR, I HAVE EXPLAINED THE ABOVE RISKS TO SUCH MINOR.

I hereby expressly waive and release any and all claims which I may have, or which I may hereafter have, whether known or unknown, against the Company, and its subsidiaries, officers, directors, managers, employees, agents, affiliates, shareholders, members, successors, and assigns (collectively, "Releasees"), on account of injury, death, or property damage arising out of or attributable to my participation in the Activities, whether arising out of the ordinary negligence of the Company or any Releasees or otherwise. I covenant not to make or bring any such claim against the Company or any other Releasee, and forever release and discharge the Company and all other Releasees from liability under such claims. This waiver and release does not extend to claims for gross negligence, intentional or reckless misconduct, or any other liabilities that California law does not permit to be released by agreement.

I understand that by signing this release, I am waiving any and all claims, of any kind arising out of or attributable to my participation in the Activities, including those claims that may be unknown to me, or which I do not suspect to exist at this time. WITH THE INTENTION OF WAIVING ALL UNKNOWN AND UNSUSPECTED CLAIMS, I HEREBY EXPRESSLY WAIVE ALL RIGHTS, BENEFITS, AND PROTECTIONS I MAY HAVE UNDER CALIFORNIA CIVIL CODE SECTION 1542, WHICH READS AS FOLLOWS:

A general release does not extend to claims that the creditor or releasing party does not know or suspect to exist in his or her favor at the time of executing the release and that, if known by him or her, would have materially affected his or her settlement with the debtor or released party.

I shall defend, indemnify, and hold harmless the Company and all other Releasees against any and all losses, damages, liabilities, deficiencies, claims, actions, judgments, settlements, interest, awards, penalties, fines, costs, or expenses of whatever kind, including attorney fees, fees and the

costs of enforcing any right to indemnification under this Agreement, and the cost of pursuing any insurance providers, arising out of or resulting from any claim of a third party related to my participation in the Activities, including any claims arising out of my own negligence or the ordinary negligence of the Company.

I hereby grant Company, without limitation, the right to use my name and likeness in connection with the Activities for any publicity without further compensation or permission as further detailed in the accompanying document, "Publicity Waiver And Release", which is incorporated by reference into this Agreement.

I understand that I must provide my own insurance for myself or for the minor participant, if I am entering into this Agreement on behalf of a minor. The Company will NOT provide insurance for me. I authorize the Company to obtain necessary medical treatment for me in the event of such injury or illness and I release and hold harmless the Company subsidiaries, officers, directors, managers, employees, agents, affiliates, shareholders, members, successors, and assigns, including any and all subsidiaries, affiliations, or other entities controlled directly or indirectly by Company in my treatment. I further agree that I am solely responsible for any and all necessary medical treatment and bills in the event of any illness or injury during the Activities or traveling to and from the Activities.

This Agreement and the accompanying document, "Publicity Waiver and Release", constitute the sole and entire agreement of the Company and me with respect to the subject matter contained herein and supersedes all prior and contemporaneous understandings, agreements, representations, and warranties, both written and oral, with respect to such subject matter. If any term or provision of this Agreement is held invalid, illegal, or unenforceable in any jurisdiction, such invalidity, illegality, or unenforceability shall not affect any other term or provision of this Agreement or invalidate or render unenforceable such term or provision in any other jurisdiction. This Agreement is binding on and shall inure to the benefit of the Company and me and their respective heirs, successors, and assigns. All matters arising out of or relating to this Agreement shall be governed by and construed in accordance with the internal laws of the State of California without giving effect to any choice or conflict of law provision or rule (whether of the State of California or any other jurisdiction). Any claim or cause of action arising under this Agreement may be brought only in the federal and state courts located in Monterey County, California and I hereby consent to the exclusive jurisdiction of such courts.

Please provide the information requested below. Company is not responsible for failure to provide the requested information and/or incorrect information.

Medications (if any): _____

Allergies (if any): _____

Any other pertinent information: _____

In the event of an emergency, please contact:

Name:	Relationship to Minor (if applicable):
Address:	City/State/Zip:
Phone Number:	Mobile Number:

BY SIGNING BELOW, I ACKNOWLEDGE THAT I HAVE READ AND FULLY UNDERSTOOD ALL OF THE TERMS OF THIS AGREEMENT AND THAT I AM VOLUNTARILY GIVING UP SUBSTANTIAL LEGAL RIGHTS, INCLUDING THE RIGHT TO SUE THE COMPANY FOR CLAIMS, WHETHER KNOWN OR UNKNOWN, ARISING OUT OF MY PARTICIPATION IN THE ACTIVITIES.

Signed:

Printed Name:

Address:

Date: _____

Email: _____

I am the parent or legal guardian of the minor named above. I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Release of Liability, Assumption of Risk, And Medical Waiver.

Signed:

Printed Name of Parent or Legal Guardian:

Address:

Date: _____

Email: _____