



[SAMPLE]

Risk and Release

TheatreTO

2025-2026

ISSUED BY

YOUR COMPANY NAME

REPRESENTATIVE

YOUR NAME

YOUR EMAIL

YOUR PHONE



Risk and Release Form

Event/Project Name: _____

Date: _____

Volunteer Information

Full Name: _____

Email: _____

Phone Number: _____

Acknowledgment of Risk

I understand that participating in [EVENT/PROJECT] involves certain risks, including but not limited to:

- Minor injuries such as cuts, bruises, or sprains
- Accidents related to equipment or event activities
- Other unforeseen risks

I acknowledge that I am voluntarily participating and accept these risks.

Release of Liability

In consideration of being allowed to participate, I agree to release, waive, and hold harmless [COMPANY NAME], its staff, volunteers, and partners from any claims, damages, or injuries arising out of my participation, except in cases of gross negligence or intentional misconduct.

Medical Consent

In case of an emergency, I authorize [COMPANY NAME] to seek medical treatment on my behalf if necessary. I understand that I am responsible for any medical costs incurred.

Emergency Contact

Name: _____

Phone: _____

Agreement

I have read this Risk and Release Form, understand its contents, and agree to the terms.

Signature: _____

Date: _____

Parent/Guardian Signature (if under 18): _____

Date: _____