



**SkillZone DIY Workshop  
Release and Liability Waiver Form**

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**Name and Age of Participant:**

**Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Please initial that you have read each of the following:**

\_\_\_\_\_ I hereby grant permission for the Participant listed above to participate in the SkillZone DIY Workshop facilitated by Hands On! Discovery Center.

\_\_\_\_\_ I hereby waive Hands On! Discovery Center, its officers, employees, and volunteers from any liability of accidents or bodily injury and loss or damage to personal property associated with the activities of the SkillZone DIY Workshop.

\_\_\_\_\_ I understand that the Participant will be utilizing hand tools (hammers, screwdrivers, etc.) and power tools (drill, sander, etc.) with adult supervision and proper safety equipment.

\_\_\_\_\_ I understand that the Participant must follow all instructions and guidelines given by Hands On! Discovery Center staff members.

\_\_\_\_\_ I understand that any violation of the rules mentioned above or conveyed during the facilitation of the SkillZone DIY Workshop may result in the Participant's dismissal from the program without financial reimbursement.

\_\_\_\_\_ I authorize Hands On! Discovery Center to capture, edit, publish, and reproduce photographs and/or video of the Participant for its own records, public relations, programs, social media, and promotional purposes.

**Name of Parent/Legal Guardian:**

**Print:** \_\_\_\_\_ **Sign:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Relationship to Participant:** \_\_\_\_\_

