



The undersigned parent or legal guardian of _____ (“Student”), hereby enrolls Student, in Session ____ of Classes at Taliesin, Spring Green (the “Class”) sponsored by Taliesin Preservation, Inc. (“TPI”).

1. RULES AND REGULATIONS. The parent or guardian of the Student acknowledges and agrees that the Student is required to abide by and uphold all policies, rules, regulations, and decisions as set forth by Taliesin Preservation. By signing below, the undersigned agrees that he or she has reviewed and understands those policies, rules, regulations, and decisions. Disregard of the policies, rules, regulations, or decisions of Taliesin Preservation or disruption of the community or the Class may be deemed sufficient cause for dismissal of the Student from the Class without refund of Class tuition.
2. ASSUMPTION OF RISK AND RELEASE OF LIABILITY Knowing the potential risks of injury or damage that may occur as a result of the Student’s participation in the Class, including but not limited to potential risks of the physical requirements of participation, and in consideration of the Student’s participation in the Class, I hereby release and agree to hold harmless, indemnify and defend the Taliesin Preservation, Inc. and its officials, officers, trustees, employees, agents, volunteers, sponsors, and students from and against any claim that the Student or any other person may have for any losses, damages, costs, or injuries arising out of or in connection with the Student’s participation in this Class, including claims based on the negligence of Taliesin Preservation, Inc. or its or their respective officials, officers, trustees, employees, agents, volunteers, sponsors, or students to the full extent permitted by law. This Assumption of Risk and Release of Liability applies to both on- and off-site activities and field trips.
3. PERMISSION FOR TREATMENT IN MEDICAL EMERGENCY. I understand that my signature below is both a medical and liability release. If any accident should occur, I hereby authorize Taliesin Preservation, Inc. to arrange for emergency medical care deemed necessary by Taliesin Preservation, Inc. I agree and verify that I will be responsible for any medical costs incurred as a result of the Student’s participation in the Class.
4. PERMISSION FOR PHOTOGRAPHS: Taliesin Preservation, Inc. has my full permission to use photographs of the Student for promotional purposes as it deems appropriate. These purposes may be for internal or external use and may include collateral materials, newsletters, advertising, marketing, publicity, or other uses.

SIGNATURE: I indicate by my signature below that I have read the terms and conditions of the Student’s participation in the Class and agree that the Student will abide by them. I have carefully read all of the terms of this agreement and acknowledge that I understand those terms. No representation, statement, or inducement, oral or written, apart from the foregoing written statements contained in this agreement, has been made or is being relied upon by me in connection with my execution of this agreement. This agreement shall be governed by the laws of the State of Wisconsin shall be the forum for any lawsuits filed under or incident to this agreement or to the Class. If any portion of this agreement is held invalid, the remainder shall continue in full force and effect.

Parent’s / Guardian’s Name (Please Print) Date

Parent’s / Guardian’s Signature (by my Signature, I hereby release all claims that either I or the Student have or may have)

Emergency Contact Information:

