WAIVER AND RELEASE OF LIABILITY

In consideration of having a photography session on the grounds of ________________ at Historic Bethlehem Museums & Sites, the undersigned, individually, or if under the age of 18, the parent or legal guardian of the undersigned, acknowledges and agrees that there is a risk of injury associated with participation in photography sessions. The undersigned knowingly and freely assumes such risks, whether known or unknown, foreseen or unforeseen, future or contingent, even if arising from the negligence of Historic Bethlehem Museums and Sites or others, and assume full responsibility for my participation for myself, and on behalf of my heirs, assigns, personal representatives, release and hold harmless Historic Bethlehem Museums and Sites, their officers, officials, agents and/or employees, other participants, licensees, subsidiaries, affiliates or others associated from any and all liability, injury, damage or claims arising from or in connection with my participation.

Date/Dates of Photography Session: ________________

I have read this Waiver and Release of Liability Agreement, fully understand its terms, and understand that I have given up certain rights by signing it, and sign it freely and voluntarily.

Signature of Participant: ____________________________
Printed Name: ________________________________
Date: ________________________________

If participant is under the age of 18 years old, a signature of a parent or legal guardian is required
Signature of Parent/Guardian: ____________________________
Printed Name: ________________________________
Date: ________________________________

Signature of Photographer: ____________________________
Printed Name: ________________________________
Date: ________________________________