

UnCarved Block Program

PARENT CONSENT

Release and Waiver of Liability and Assumption of Risk Agreement

For Good and Valuable Consideration, including permission for _____
(the "minor") to participate in Durastudio LLC dba The UnCarved Block Program (UCBPROGRAM)
and related activities, I the parent/guardian of the minor, for myself and on behalf of the minor agree to
the following:

1. I consent to the minor's participation in the event or activity;
2. I am aware that participating in the UCBPROGRAM can involve MANY RISKS OR INJURY to the minor. I understand that the damages and risks of participating in events and activities include serious injury or impairment to the minor's body, general health and well-being. Because of the dangers of participating in the UCBPROGRAM I recognize the importance of following the staff's instructions regarding techniques, training, rules, and to obey such instructions;
4. I hereby voluntarily assume all risks associated with participation by the minor and agree to indemnify, defend and save harmless the UCBPROGRAM, their officers, agents, servants and employees, from any and all liability, claims, causes or action or demands of any kind and nature whatsoever which may arise by or in connection with the minor's participation in any activities related to the activity except injury arising from the sole negligence of the UCBPROGRAM;
5. The terms hereof shall serve as a release and assumption of risk for the minor's heirs, estate, executor, administrator and assignees;
6. I hereby agree to submit any disputes that may rise relating to this activity to binding arbitration before three (3) arbitrators, in accordance with the Rules of the American Arbitration Association;
7. I assume any and all risks of personal injuries to the minor and authorize the UCBPROGRAM to contact or employ a licensed physician to render any medical treatment that may be deemed necessary for the minor or to take and admit the minor to any hospital. If such medical treatment or hospitalization is required, I agree to pay all medical and hospital bills relating thereto, permanent or partial disability, or death and damage to the minor's or my property, caused by or arising from the minor's participation in the event or activity;
8. Photographs, pictures, slides, movies or videos taken of the minor may be taken in connection with the minor's participation in the event or activity without compensation from the UCBPROGRAM and consent to the use of photographs, pictures, slides, movies, or videos for any legal purpose;
9. The minor is in good health and has no physical condition that would prevent the minor from participation in the event or activity.

Both parents must sign unless only one (1) parent is living or unless only one (1) has legal custody. Legally appointed guardians must also sign.

Printed Names (parents/guardians) Signature

Date
