

MINOR RELEASE FORM

For members under 18 years of age to use equipment/facilities.

I hereby give permission for my child to attend Acton Public Access Television (APAT) courses and workshops. Upon successful completion of each course, I give my permission for my child, (name) _____, to use APAT's access equipment and facilities to produce programming to be cablecast on the access channel.

I hereby assume complete responsibility for the actions of said child while using APAT's programming equipment and facilities. I accept full responsibility, and will fully reimburse APAT for damage to any such equipment or facilities while in the possession of and/or in use by my child. Negligent handling of such equipment and/or facilities will result in the forfeiture of the right of my child to use APAT's equipment and/or facilities in the future.

Please print:

Child's Name: _____

Parent/Guardian: _____

Address: _____

Phone: _____

Email: _____

Parent/Guardian Signature: _____

Date: _____