



**VOLUNTEER RELEASE OF LIABILITY**

(THIS IS A LEGAL DOCUMENT. PLEASE READ CAREFULLY AND IF YOU AGREE WITH ITS CONTENTS, SIGN WHERE INDICATED BELOW.)

Volunteer at City Opera House (COH) assumes all risks, hazards and conditions encountered while on the COH premises. The COH shall not be held responsible for any damage, loss of personal property or expense incurred by Volunteer while performing any of his/her activities on the premises while acting as a Volunteer.

Volunteer shall be responsible for, bear, relieve, indemnify, defend and hold COH and its agents and employees (the "Indemnitees") harmless from and against any and all claims, actions, damages, liabilities, losses, cost and expenses, including but not limited to attorneys' fees and settlement costs, arising directly or indirectly out of or resulting from or in connection with the Volunteer's activities while on the COH premises, provided that any such claim, action, damage, liability, loss, cost or expense does not arise out of the sole negligence or willful misconduct of the COH or any of its agents or employees.

**PHOTO/AUDIO/VIDEO RELEASE**

I authorize COH to record my image and voice (or that of my minor child named below) and give COH and all persons or entities acting pursuant to COH permission or authority all rights to use the recorded images and vocal recordings. I understand that said images and recordings will be used for educational, advertising, and promotional purposes in all conventional and electronic media, and any future media. I also authorize the use of any printed material in connection therewith. I understand and agree that these images and recordings may be duplicated, distributed with or without charge, and/or altered in any form or manner without future/further compensation or liability, in perpetuity.

**Volunteer:** Agreed to this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Print Name(s) of underage child(ren) for PHOTO/AUDIO/VIDEO RELEASE:

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**City Opera House Representative**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_