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Legal Waiver

I, the undersigned, am the legal parent/guardian of the below-mentioned child, and I have read and understood the The Actors Room Official Registration Letter and the COVID-19 Waiver. I hereby agree to all terms and conditions in both documents. I understand that while the season details are season-specific, the remaining terms and policies outlined in the Letter and Waiver are applicable superseding date and that my consent to such terms is understood to be perpetual. I reserve the right to withdraw my consent at any time. I take full responsibility for the safety of my child attending classes and activities facilitated by The Actors Room through its Creative Director, Stefano DiMatteo, its affiliates, or any entities contracted by or connected to The Actors Room. I understand that The Actors Room Emergency Policy is available upon request. Should my child become injured, including but not limited to experiencing an allergic reaction, or should my child's personal items be considered lost, misplaced, stolen, or damaged, while under the supervision of or as a result of supervision by The Actors Room, its Creative Director, Stefano DiMatteo, its affiliates, or any entities contracted by or connected to The Actors Room, none of these parties will in any way be held liable or responsible and will not be required to cover any reimbursement, replacement, insurance costs, penalties, or fees.

Child's Name (Please Print): _____

Parent/Guardian's Name (Please Print): _____

Parent/Guardian's Signature: _____

Date: _____

