



RockBand University

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rockbanduniversity.com

EMERGENCY CONTACT

Student's Name: _____ Age: _____

First Contact's Name: _____ Relationship: _____

Primary Phone: _____ Secondary Phone: _____

Second Contact's Name: _____ Relationship: _____

Primary Phone: _____ Secondary Phone: _____

SAFETY INFORMATION

Does the student have any medical conditions, allergies, or special needs the staff should know about?

Does the student have any behavioral or emotional issues the staff should know about?

Is the student taking any medications to treat a physical, emotional, or behavioral condition?

CODE OF CONDUCT AGREEMENT & RELEASE OF LIABILITY

I, (student) _____, will abide by the guidelines listed below while attending any programs at RockBand University.

- No violence of any kind. Bullying will not be tolerated.
- Always respect each other. Be respectful to all students, guests, and staff members.
- Respect all instruments, equipment, and property. Treat them with care.
- Be supportive of one another, especially in regard to individual musical abilities and creative efforts.

I have read and agree to abide by these guidelines. I understand that my violation of them can lead to suspension or expulsion from any of the programs at RockBand University without a refund in tuition.

I understand and agree that:

1. Attending RockBand University (RBU) as a student will involve activities such as, but not limited to, being in a loud environment, using electrical equipment such as amplifiers, speakers, and musical instruments, getting on and off the stage, and playing, performing, working with, or in front of, other individuals in various settings. The described activity may be hazardous, strenuous, and/or physical in nature. I hereby assume any and all risks of bodily injury, personal injury, sickness, disease, death or property damage and to release and hold harmless RBU, its owners, directors, employees, and volunteers. This waiver, release and assumption of risk are to be binding on the heirs and assigns. I will indemnify and hold RBU harmless from any loss, liability, damage, cost or expense, including litigation, which they may incur as a result of any injury and/or property damage which myself or my minor children may sustain while participating in said activities. I will make good any loss or damage or cost RBU may have to pay if any litigation arises on account of any claim made by said minors or by anyone on said minor's behalf. Knowing the risk involved, nevertheless, I voluntarily request permission for myself or minor child to participate in the described activity.

2. By signing this agreement, I acknowledge the contagious nature of the coronavirus disease ("COVID-19"), and the severe acute respiratory syndrome coronavirus 2 ("SARS-CoV-2") and voluntarily assume the risk that I may be exposed to, or infected by COVID-19, by attending the activities, practices, or performances. I understand that the risk of becoming exposed or infected by COVID-19 may result from the actions, omissions, or negligence of myself and others, including, but not limited to: RBU employees, volunteers, activity participants, and their families. I voluntarily agree to assume all of the foregoing risks and accept sole responsibility for any injury or illness to my guests, my family, or myself, that I may experience or incur in connection with attendance of RockBand University or participation in activities/programs involving RBU. I hereby release, covenant not to sue, discharge, and hold harmless RBU, its employees, agents, and representatives, of and from all liabilities, claims, actions, damages, costs or expenses of any kind arising out of or relating thereto any of the risks as described above. I understand and agree that this

release includes any claims based on the actions, omissions, or negligence of RBU, its employees, agents, and representatives, whether a COVID-19 infection occurs before, during, or after participation in any RBU program.

3. I understand RBU has the right to cancel or change programming based on inclement weather, mosquito spraying, poor air quality and/or any other natural factors that may alter outdoor programming. I further acknowledge and agree that RBU reserves the right to cancel the programming if, in their sole discretion, circumstances beyond its control including, without limitation, acts of the government, riots, fires, floods, or other casualty, epidemics, earthquakes, Public Safety Power Shut Offs, or unusually severe weather, necessitate such a cancellation. RBU shall provide notice of cancellation under this provision as soon as is practicable and will reschedule, if applicable.

4. In case of emergency, accident, illness, or other incapacity occurring while under RBU's authority, I give my permission to be treated by medical professionals and admitted to the hospital if necessary. This authorization applies whether or not the charges are covered by my insurance, and I am responsible for all reasonable medical and emergency expenses incurred on my behalf, regardless of whether I would have authorized such expenses under separate circumstances.

5. I understand RBU staff may photograph or videotape me and/or my minor children and the RBU may use such photographs or videotapes to promote RBU programs and classes. I expressly allow, and hereby waive any objection to, RBU's photographing and/or videotaping of me and/or my minor children when I and/or my minor children are participating in an RBU program. I understand all photos and videotapes will remain the property of RBU.

6. I agree that I will follow all RBU rules and will remain within the parameter of RBU activities at all times. RBU is not responsible for children following the dismissal of a program. I understand that activities are not child care as defined by the State of California.

7. I have read this agreement, fully understand its terms, and have signed it freely and without any inducement or assurance of any nature, intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Student's Signature: _____ Date: _____

I represent that I am the parent and/or guardian of the minor who has signed above and is the participant in the program(s). I agree that we both shall be bound by this release form.

Guardian's Signature: _____ Date: _____