

# ACTING FOR KIDS & TEENS PORTLAND

Welcome! We are so happy you are here! Our AFK&T Coaches spend quality time [consulting](#), mentoring and walking kids and parents through the professional and emotional world of being an artist. All of our kids are held to a high standard professionally as well as in their personal lives and academically. Our program, backed by a supportive community of creatives, also helps our students acquire life skills and training that they will carry throughout their entire lives.

We encourage students of all ages and levels of interest to join us. This is a safe, loving place where everyone is welcome! Please call [503.806.0909](tel:503.806.0909) or email [info@actingforkidsandteens.com](mailto:info@actingforkidsandteens.com) with any questions. Below are some steps to help you get started:

**Step 1:** Choose your class.

**Step 2:** Complete our on-line registration

**On-going Classes:** Tuition is due at registration. Mid-month registration will be prorated. Tuition payment is autopay on the 1st of every month. If you wish to cancel classes you must provide written notice by the 20th of the month.

**Workshops:** Different payment options are provided for different workshops. Workshops under \$150 will be charged in full at time of registration. All others will offer two options: pay in full or a specific payment option (included in the class description) All tuition is due one week prior to the start of the workshop and billed automatically. Deposits are non-refundable and non-transferable.



**Step 3:** Review our [Release Forms](#). Acknowledgement is required when you registration.

**Step 4:** Read our Policies & FAQs.

**Step 5:** Please let us know if your kid or teen has any special requirements or needs to be taken into consideration. These would include mental health, developmental, behavioral issues, challenging family situations or allergies. We make every student's mental and physical safety a priority. When using our registration portal, you will be prompted to inform us.

**Step 6:** [Join our mailing list](#) and stay up to date with AFK&T! You will be the first to know about special guests, tours, events, opportunities and Workshops before they are shared across social media.



## Assumption of Risk Policy

*Please note: This Release Form is required at the time you register for Ongoing Classes or Workshops. You will be prompted to accept this agreement waiver before checking out through our registration portal. Should you choose not to sign this waiver, your student will not be able to participate in Ongoing Classes, Workshops or Industry Showcase. Please call 503.806.0909 or email [info@actingforkidsandteens.com](mailto:info@actingforkidsandteens.com) should you have questions.*

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AND PARENTAL CONSENT AGREEMENT ("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in the The Studio NW/Acting for Kids & Teens LLC classes and/or workshops, and any activities associated with The Studio NW/Acting for Kids & Teens LLC and Katie O'Grady I, for myself for personal representative, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent and I understand the nature of classes and that I am qualified, in good health, and in proper physical condition to participate in such activities. I further agree and warrant that if at any time I believe conditions to be unsafe I will immediately discontinue further participation in any classes, workshops, or activities associated with The Studio NW/Acting for Kids & Teens LLC and or Katie O'Grady.
2. I FULLY ACCEPT AND ASSUME ALL RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation in Acting for Kids & Teens LLC/The Studio NW classes, workshops, or activities associated with Acting for Kids & Teens LLC/The Studio NW and Katie O'Grady.



**Assumption of Risk Policy (cont)**

3. I HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE Acting for Kids & Teens LLC/The Studio NW, Katie O'Grady, her respective administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owner and lessor of premises on which the activity takes place, (each considered one of the "RELEASES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASE", AND I FURTHER AGREE that if, despite the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the "RELEASES", I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE "RELEASES" from any litigation expenses, attorney fees, loss, liability, damage, or cost which may incur as the result of such claim. I further agree to arbitration of such claims pursuant to the rules of the American Arbitration Association.

4. Should any portion of the agreement be held uncomfortable, it shall be severed from the agreement leaving the remaining portions enforceable.

I HAVE READ THE AGREEMENT, FULLY UNDERSTAND IT'S TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY THE LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

\_\_\_\_\_  
**Student Name**

\_\_\_\_\_  
**Participant/Parent Signature**

\_\_\_\_\_  
**Date**



## Photo/Video Release Form

*Please note: This Release Form is required at the time you register for Ongoing Classes or Workshops. You will be prompted to accept this agreement waiver before checking out through our registration portal. Should you choose not to sign this waiver, your student will not be able to participate in Ongoing Classes, a Workshop or Industry Showcase. Please call 503.806.0909 or email [info@actingforkidsandteens.com](mailto:info@actingforkidsandteens.com) should you have questions.*

By signing this release form, THE STUDIO NW/ACTING FOR KIDS, LLC, I agree the use the following personal information:

- (1) My picture - including photographic, motion picture, and electronic (video) images.
- (2) My Voice - including sound and video recordings

I hereby grant to THE STUDIO NW/ACTING FOR KIDS, LLC, it's subsidiaries, licensees, successors and assigns, the right to use, publish, and reproduce, for all purposes, my name, pictures of me in film or electronic (Video) form, sound and video recordings of my voice, and printed and electronic copy of the information described in sections (1) and (2) above in any and all media, including without limitation, cable and broadcast television and the internet, and for exhibition, distribution, promotion, advertising, sale, press conferences, meetings, hearings, educational conferences and in brochures and other print media. The permission extends to all languages, media, formats and markets now known or hereafter devised. This permission shall continue forever unless I revoke the permission in writing.



**Photo/Video Release Form (cont)**

I further grant THE STUDIO NW/ACTING FOR KIDS, LLC all rights, title, and interest that I may have in all finished pictures, negatives, reproductions, and copies of the original print, and further grant THE STUDIO NW/ACTING FOR KIDS, LLC the right to give, sell, transfer, and exhibit the print in copies or facsimiles thereof, for marketing communications, or advertising purposes, as it deems fit.

I hereby waive the right to receive any payment for signing this release and waive the right to receive any payment for THE STUDIO NW/ACTING FOR KIDS, LLC use of any of the material described above for any of the purposes authorized by this release. I also waive any right to inspect or approve finished photographs, audio video, multimedia, or advertising recordings and copy or printed matter or computer generated scanned image and other electronic media that may be used in conjunction therewith or to approve the eventual use that it might be applied. I acknowledge that I have read the foregoing and I fully understand the contents.

\_\_\_\_\_  
**Student Name**

\_\_\_\_\_  
**Participant/Parent Signature**

\_\_\_\_\_  
**Date**