



Adult Application for IW Membership

First Name _____ M.I. _____ Last Name _____

O M O F BirthDate ____ / ____ / ____

Mailing Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Email Address _____

Occupation _____ Employer _____

Emergency Contact #1 _____ Phone _____

Emergency Contact #2 _____ Phone _____

In consideration of gaining membership, authorizing participation in activities and programs of ImagineWorks (IW) and to use its facilities, equipment, machinery, tools, and in addition to the payment of any fee or charge, I do hereby waive, release, and discharge IW and its officers, agents, employees, representative, executors, and all others from any and all responsibilities or liability for injuries or damages resulting from my participation in any actives sponsored by IW. I do also hereby release all of those mentioned and any others acting upon their behalf from any responsibility or liability for any injury or damage to myself, including those caused by the negligent act or omission of any those mentioned or others acting on their behalf or in any way arisen out of or connected with my participation in any actives hosted by IW or the use of any equipment provided by IW. By signing below I agree to this consent and release agreement.

All memberships are non-refundable or transferable.

I represent that I am at least 18 years of age

Signature _____ Date _____

Annual Membership Fee: \$20.00 USD

Please consider making a donation to our program.

\$5 _____ \$10 _____ \$50 _____ \$100 _____ \$ _____ .00 _____

<u>IW USE ONLY</u>	
Membership Effective Date: _____	Membership #: _____
Payment: \$ _____ O Check O Cash	



Photograph/Media Consent and Release

First Name _____ M.I. _____ Last Name _____

I hereby consent and authorize employees, staff, volunteers, and third party members of ImagineWorks (IW) to take photographs or motion pictures of myself; and produce videotapes, audiotapes, or other types of media productions that capture my name, voice, image, or any of my likeness.

I authorize IW to copyright the materials, and authorize IW to use, reuse, copy, publish, display, relicense to third party, and distribute the materials in any promotional material, and media that may include but not limited to publications, catalogs, articles, magazine, brochures, website, without notification.

I will not receive any payments from IW for signing this release or as a result of any publication materials.

By signing below, participant (or the Parent/Guardian of a participant under 18 years of age) agrees to this Consent and Release Agreement. I represent that I am at least 18 years of age (or to be completed by Parent/Guardian of Participant under 18)

Print Name _____

Signature _____ Date _____

IW USE ONLY

Membership Effective Date: _____ Membership #: _____

Payment: \$ _____ Check Cash