

Indemnity Form for Video Production & Content Creation Workshop

Workshop Details

- **Event Name:** Video Production & Content Creation Workshop
- **Date:** 17th of January, 2024
- **Time:** 10:00 AM to 4:00 PM
- **Location:** Gladstone Entertainment and Convention Centre
- **Description:**
A one-day workshop designed to introduce participants to the world of filmmaking and content creation. The workshop will explore various roles in film production and translate these concepts for use on platforms like YouTube, TikTok, and more. Participants will engage in hands-on activities using filmmaking gear, learn about acting with scripts, photo and video editing, and creating their own content.

Host Information

- **Host:** Wezzy Cruze
- **Contact:** management@wezzycruze.com

Participant Information

Please complete the information below:

- **Full Name of Participant:** _____
- **Date of Birth:** _____
- **Parent Contact Name:** _____
- **Parent Contact Phone Number:** _____

Indemnity Clause

By signing this form, you acknowledge and agree to the following terms:

1. Risk Acknowledgement:

I understand that by attending the **Video Production & Content Creation Workshop**, I will be participating in a hands-on learning experience, which includes the use of cameras, microphones, mobile devices, and other equipment that may involve certain risks, including but not limited to:

- Risk of personal injury or accidents while using equipment.
- Risk of damage to personal belongings, including mobile devices, clothing, or accessories.
- Risk of exposure to the risks inherent in acting, photography, and other workshop activities.

2. Indemnity:

I agree to indemnify and hold harmless **Wezzy Cruze**, the event staff, the Gladstone Entertainment and Convention Centre, and any associated personnel or affiliates from any and all claims, liabilities, or legal actions arising out of my participation in this workshop, including but not limited to personal injury, property damage, or loss.

Health and Safety Considerations

- **Does the participant have any allergies or medical conditions that need to be considered?**
 - Yes (Please specify) _____
 - No

Age Requirements

- **Minimum Age:** 13 years
- **Maximum Age:** 16 years
- **Parental Consent:**
If the participant is under 18, a parent or legal guardian must sign this form to consent to their child's participation in the workshop.

Photographic and Media Consent

- Photos and videos may be taken during the workshop by **staff of the Gladstone Regional Council** and used for promotional and marketing purposes.
Do you consent to the use of your image or likeness?
 - Yes, I consent
 - No, I do not consent

Emergency Contact Information (for minors only)

- **Parent/Guardian Name:** _____
- **Parent/Guardian Phone Number:** _____

Signature of Participant and Parent/Guardian

By signing below, I acknowledge that I have read and understood this indemnity form, and I agree to the terms outlined above.

- **Participant's Name:** _____
- **Parent/Guardian Name:** _____
- **Date:** _____
- **Signature of Participant:** _____
- **Signature of Parent/Guardian:** _____ (If participant is under 18)