

Photo Booth Waiver and Release Form

South Georgia Photobooth Rentals

Valdosta, Georgia 31602

(229)712-9472

EVENT DETAILS:

Event Date: _____

Event Venue: _____

PARTICIPANT INFORMATION:

Full Name: _____

Phone Number: _____

Email Address: _____

Acknowledgment of Risks:

I, the undersigned, hereby acknowledge that the participation in the photo booth services provided by South Georgia Photobooth Rentals involves inherent risks. These risks include, but are not limited to, physical injury, property damage, and other unforeseen occurrences.

Release of Liability:

In consideration for being permitted to use the photo booth services provided by South Georgia Photobooth Rentals, I hereby release, waive, discharge, and covenant not to sue South Georgia Photobooth Rentals, its owners, employees, agents, and representatives from any and all

liability, claims, demands, actions, and causes of action whatsoever arising out of or related to any loss, damage, or injury, including death, that may be sustained by me or any property belonging to me while participating in the photo booth services.

ASSUMPTION OF RISK:

I understand and acknowledge that the use of the photo booth may involve actions or elements that may be hazardous to me or my property. I voluntarily assume full responsibility for any risks of loss, property damage, or personal injury, including death, that may be sustained by me or any loss or damage to property owned by me, as a result of being engaged in the photo booth services.

PHOTO RELEASE:

I grant South Georgia Photobooth Rentals the right to use any photographs taken of me during the event for promotional purposes, including but not limited to, social media, marketing materials, and the company website.

INDEMNIFICATION:

I agree to indemnify and hold harmless South Georgia Photobooth Rentals from any loss, liability, damage, or costs, including court costs and attorney's fees, that may arise from my use of the photo booth services.

EMERGENCY CONTACT:

In the event of an emergency, the following person can be contacted:

Emergency Contact Name: _____

Emergency Contact Phone: _____

PARTICIPANT'S CONSENT:

I have read this Waiver and Release Form, fully understand its terms, and voluntarily agree to its contents. I understand that I have given up substantial rights by signing this document and sign it voluntarily.

Participant's Signature: _____

Date: _____