



Barn Workshop Studio

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All Ceramics Students must complete this section.

Liability Release:

I (name of participant) _____ realize that my participation in the Barn Workshop Ceramics Classes may involve some risk of personal injury and damage to the studio property: therefore, I assume all risks related to these activities and release the Barn Workshop Studio, its directors, officers and employees from all resulting liability from personal injury and property damage.

Health insurance coverage: _____

I have read and freely signed this agreement, which shall take effect as a sealed instrument.

Signature _____ Date _____

Emergency Contact:

Name: _____

Phone Number: _____