## LIABILITY WAIVER AND RELEASE FORM (MINOR CHILD)

## THIS IS A RELEASE OF LEGAL RIGHTS — READ AND UNDERSTAND BEFORE SIGNING

I hereby certify that I am the adult parent or guardian of	, a minor
child under the age of eighteen years, with birthdate	and I consent to
his/her participation in any activities at the Skyline Penthouse, Creative Studios	& Event Spaces, (the "Studio")
located at	and operated and
maintained by AMK Inc., Ana Maria Kim, Inc., and its affiliates.	
I understand and acknowledge that I am fully aware of and assume the risks (inc	cluding but not limited to the risk of
bodily injury, property loss or damage) of said minor child's participation in any	y activities at the Studio. I recognize
my responsibility to ensure that said minor child participates only in those activi	ities for which he/she has the
required skills, qualifications, training and physical conditioning. I understand the	hat the Studio shall have no
responsibility to pay for medical treatment and related costs if said minor child i	s injured during his/her presence in
the Studio.	
I further understand and agree that the Studio is "as is", and that the Studio discl	aims all warranties, express or
implied, including warranties of merchantability and fitness for a particular purp	oose.
Knowing the risks described above, I agree, personally and on behalf of the min	or child named above, to assume all
the risks and responsibilities surrounding my minor child's use of the Studio. To	the fullest extent allowed by law, I
hold harmless and agree to indemnify the Studio, its officers, directors, staff, per and against any present or future claim, cause of action, loss or liability for injur	
minor child may suffer or for which said minor child may be liable to any other	person, related to said minor child's
participation in any activities at the Studio, resulting from any cause whatsoever	, and regardless of fault.
I am at least eighteen years of age and have carefully read and freely signed this	Liability Waiver and Release Form
(Minor Child). I understand and agree that no oral or written representations can	or will alter the contents of this
document. I agree that this agreement shall be governed by the laws of the state	of California (excluding its conflict
of laws principles).	
Name:	
Signed: Date:	