



Apple Store Permission Statement for Minors

Program: _____

This Permission Statement, signed by the Program attendee's parent or legal guardian, is required for attendance. The undersigned is authorized to sign this Permission Statement as the parent or guardian of the below named child.

Please provide the following information:

Attendee _____ Age _____

Emergency contact information:

Name _____

Address _____

City _____ Province _____ Postal Code _____

Phone number () _____

I hereby grant permission for my child to attend and participate in the Program, and agree to the following terms and conditions:

- I hereby release and discharge Apple Canada Inc. ("Apple") and its directors, officers, employees, subsidiaries, affiliates, contractors, and agents from and against all claims and losses of any type arising out of, or related to, my child's participation in the Program.
- Apple is not responsible for any damage to, or loss of, personal property, and I will be solely responsible for any such loss or damage, or personal injury claim, arising from my child's participation in the Program. I hereby provide permission and/or consent for my child to receive emergency medical care, if needed.
- The Program is for informational purposes only, and Apple will have no liability to any attendee and hereby disclaims any and all warranties of any kind, express or implied.
- Attendees are responsible for their own behaviour during the Program, and Apple reserves the right to remove any attendee from the Program for any reason, in Apple's sole discretion.
- I hereby consent to any and all photographs, interviews, or video taken of my child, and hereby grant to Apple the right to use, publish, duplicate, transmit, display, or copyright my child's image, interview or video for any reasonable purpose related to the Program. I shall have no right of approval, no claim to additional compensation, no right to enjoin Apple's rights hereunder or otherwise seek injunctive relief, and no claim (including defamation or invasion of privacy) for any use, alteration, distortion or illusionary effect.
- I am 18 years of age or older and have read and agree to these terms and conditions.

Signature _____

Printed name _____ Date _____

Address _____

City _____ Province _____ Postal Code _____

Phone number () _____