THS Equipment Use Agreement

Minor's Name:	
Parent or Guardian Name:	
Address:	
City: Zip:	
Home Phone: email:	
Work Phone:	
I am requesting that THS allow our child,	
 I am the parent or legal guardian, <i>circle one</i>, of this student. I understand that the use of THS facilities includes reserving and using and edit suites, checking out portable equipment such as video camera microphones and lights and use of other sophisticated and expensive e media equipment. I understand what responsibilities are required of people using THS fa equipment and know that my child understands these responsibilities a comply, if not we agree to supervise our child's use of THS facilities a equipment to ensure that the responsibilities are met. I agree to assume full responsibility for my child's use of THS's facilities assume responsibility for our child's obligations as a user under THS's Policies and Procedures, and under THS's equipment check out agreer agree to indemnify, defend and hold harmless the THS TV STUDIO a and representatives, from any and all loss or damage, expense or claim of THS's facilities. 	is, tripods, electronic icilities and and will and ties, and to soperating ment. I ind its staff in arising out
5. I am asking THS to allow my child to reserve, check out and use THS and equipment on an ongoing basis without further need to secure our ask and understand that this request and agreement will continue in eff apply to all subsequent use by our child of THS's facilities and equipm we notify THS in writing to the contrary or until our child is eighteen of age, whichever occurs first.	consent. I fect and will nent until
Date:	
Signature (student)	
Signature (parent)	