

The Coal Region Paranormal Team (CRPT) provides professional and confidential investigations of paranormal activity at businesses and residences

across the state of Pennsylvania.

INVESTIGATION PERMISSION - WAIVER OF LIABILITY

I,, have the authority to allow the CRPt and its representatives to conduct a			
My signature below validates that the investigation process has been explained to me and that I give the investigative team permission to access this property to document any/all reported paranormal activity. The members of the CRPT agree to not hold responsible the owners, or agents for the owners, of the property being investigated in the event of an accident or injury on said property. Further, the investigative team takes full responsibility for any damages to the property that occurs during the investigation.			
		Note any special requests of the owner/agents/participant	IS:
		Owner/Agent Signature	Date
CRPT Lead Investigator	Date		
CONFIDENTIALITY STATEMENT - RELEASE OF INFORMATION/EVIDENCE			
of this property (as per above) agree to the following uses Potential uses of information gained throughout the invest happenings, photos and audio) include classroom present	rvices provided by the CRPT are confidential. The owners/ agents is of information gained during the investigation of said property. Itigation process (including history of the property and paranormal tations for paranormal students, educational presentations, no names, addresses, or other personal information will be used in		
□ Information and evidence may be utilized without restriction provided that the identities of the witnesses and location of the site are protected. □ Information and evidence, including the site location, may be utilized without restriction. □ Information and evidence, including the site location and names of witnesses, may be utilized without restriction.			
		☐ Information and evidence may be utilized but only unde	er the following restrictions:
		Owner/Agent Signature	Date
CRPT Team Leader	Date		