

CLIENT INVESTIGATION CONSENT

CLIENT/ _____ CASE# _____

PROPERTY/ _____ DATE/ _____

I, _____, claim full ownership and/or rights to the property listed above, and I give South Georgia Paranormal Association permission to conduct a full or partial paranormal investigation in my home and surrounding property. By signing this form, I understand that I hold no liability to any members of South Georgia Paranormal Association due to accidents or injuries during the investigation. I understand that South Georgia Paranormal Association operates at their own risk, and therefore, I shall hold no liability to South Georgia Paranormal Association. I am also aware that South Georgia Paranormal Association takes pride in the preservation of every client's property, but as human beings, accidents do happen. If under extreme circumstances, an accident results in damage to any part of the property, including any personal items, I will not seek any legal resolve against South Georgia Paranormal Association.

Print Name

Signature

Date/ _____