

Zigmont Magic F/X Inc Waiver of Technician Agreement

I, _____ waive the option of a certified **Zigmont Magic F/X** s technician for my event on _____ . I understand that the machine is my full responsibility, and any questions will be directed to 813.689.6269.

Client Signature Date

Zigmont Magic F/X Inc.
1206 Baronwood Place
Brandon, Florida 33510
813.689.6269
zigmont@zigmont.com