



ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

Name of the Activity: _____ **Classes at Dance Studio 33**

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING OR LETTING MY CHILD PARTICIPATE IN THIS ACTIVITY, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am or my child is physically fit and have/has not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my or my child's participation in this activity.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which I or my child may participate, and that it will govern my or my child's actions and responsibilities at said activity.

In consideration of my application and permitting my child to participate in this activity, I hereby take action for myself, my child, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my or my child's death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me or my child, THE FOLLOWING ENTITIES OR PERSONS: activity sponsors, activity volunteers, activity instructors;

(B) I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I acknowledge that this activity may involve a test of a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. The risks may include, but are not limited to, those caused by facilities, temperature, condition of participants, equipment, actions of other people including, but not limited to, participants, volunteers, spectators, and instructors, and lack of hydration.

I hereby consent to me or my child receiving medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during this activity.

I understand that at this event or related activities, I or my child may be photographed. I agree to allow my or my child's photo, video, or film likeness to be used for any legitimate purpose by the instructor.

The accident waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT, AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Signature of Participant Date or Parent/Guardian if under 18 _____ Print Participant's Name DOB