

Liability Release Form

I understand that there are risks of physical injury associated with, arising out of and inherent to the activity of dance. In recognition of this acknowledged risk of injury, I knowingly and voluntarily waive all right and/or causes of action of any kind, including any all claims of negligence arising as a result of such activity from which liability could accrue to Dansations School of Dance LLC, it's officers, agents, employees, instructors, subsidiaries, and all affiliated entities (hereinafter collectively referred to as "Dansations School of Dance LLC").

I hereby agree to release Dansations School of Dance and hold Dansations harmless of all liability, and hereby acknowledge that I knowingly and voluntarily assume full responsibility for all risks of physical injury arising out of active participation in dance on behalf of the participant.

I am aware that this is a release of liability and an acknowledgement of my voluntary and knowing assumption of the risk of injury. I have signed this document voluntarily and of my own free will in exchange for the privilege of participation.

I also give Dansations School of Dance permission to use my child's picture in or on any form of advertisement for Dansations School of Dance or a Dansations School of Dance affiliated event.

The participant has my permission to participate in Dansations School of Dance Events. I warrant the below information is complete and correct. I further release Dansations School of Dance of all liabilities associated with my child's attendance at Dansations School of Dance LLC.

Parent/Guardian Signature

Date

Participant's Name

Date