

Dynamics Dance Project

Acknowledgement Of Risk And Waiver Of Liability Form

As the parent or legal guardian of, _____, I hereby consent for she/he to participate in the programs offered by Dynamics Dance Project. I recognize that potentially severe injuries, including sprains, strains, and broken bones can occur in any activity. I UNDERSTAND AND ACCEPT THAT RISK; additionally, Dynamics Dance Project has my permission to render any necessary first aid treatment to my child while in attendance at Dynamics Dance Project.

In consideration for allowing my child to use Dynamics Dance Project's equipment and facility, I hereby forever release Dynamics Dance Project, it's owners, employees, teachers, and coaches for all liability for any and all damages and injuries suffered by my child while under the instruction, supervision or control of Dynamics Dance Project, it's owners, employees, teachers, and coaches.

I understand that Dynamics Dance Project is no longer responsible for the safety of my child once my child has left the building and I understand that my child cannot leave the building until a responsible party arrives to pick her/him up.

As the parent or legal guardian of, _____, I hereby agree to individually protect for the possible future medical expenses which may be incurred by my child as a result of any injury sustained while training at Dynamics Dance Project.

I will follow all rules and policies as set forth by Dynamics Dance Project. Dynamics Dance Project reserves the right to refuse re-enrollment to any member who doesn't follow all rules and policies as set forth and contained in the Dynamics Handbook.

This acknowledgement of risk and waiver of liability, having been read thoroughly and understood completely, is signed voluntarily as to consent and intent.

Signature of Parent or Legal Guardian

Date

Please Print Name

Date