

THE DANCE COMPANY

169 W. Ventura St. - P.O. Box 495 - Kingsburg, Ca. 93631 559.897.7986

AGREEMENT OR RELEASE AND WAIVER OF LIABILITY DANCE/GYM/CHEER/FITNESS PROGRAM

I, _____ hereby agree to the following:
(Parent name or Student name if over 18 yrs.)

(1) That I am/my child is participating in DANCE/GYM/CHEER/FITNESS classes offered by The Dance Company during which I/my child will receive information and instruction about DANCE/GYM/CHEER/FITNESS education. I recognize that the DANCE/GYM/CHEER/FITNESS program requires physical exertion which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.

(2) I understand that it is my responsibility to consult with a physician prior to and regarding my/my child's participation in these classes. I represent and warrant that I am/my child is physically fit and have no medical condition which would prevent full participation in the DANCE/GYM/CHEER/FITNESS program.

(3) In consideration of being permitted to participate in the DANCE/GYM/CHEER/FITNESS classes, I agree to assume full responsibility for any risks, injuries, or damages, known, or unknown, which might incur as a result of participation in the program.

(4) In further consideration of being permitted to participate in the DANCE/GYM/CHEER/FITNESS program, I knowingly, voluntarily, and expressly waive any claim that I may have against Roberta Woods, and/or The Dance Company, their agents or employees, for injury or damages that I may sustain as a result of participating in the program.

(5) I, my heirs or legal representatives forever release, waive, discharge and covenant not to sue Roberta Woods and/or The Dance Company and/or employees of The Dance Company, for any injury or death caused by their negligence or other acts.

I have read the above release and waive of liability and fully understand its contents. I voluntarily agree to the terms and conditions stated above.

Participants Name(s): (1) _____ (2) _____

(3) _____ (4) _____

Signature: _____ Date: _____ Phone #: _____

(Parent or Guardian if under 18 yrs.)