

DANCE UP DALLAS LIABILITY & RELEASE FORM

I, _____ (PRINT PARENT NAME) have

chosen to have my child, _____ (PRINT CHILD NAME), participate in *Dance Up Dallas Summer Dance Intensive*. I acknowledge that I understand the nature of the dance activities my child will be participating in and that my child is in the proper physical condition and capable of participating in the related dance activities, understanding that *Dance Up Dallas*, nor its employees are not in any way responsible for making such a determination.

In consideration of my child's enrollment in *Dance Up Dallas Summer Dance Intensive*, I understand and agree on behalf of myself and my child, to release, hold harmless, and discharge *Dance Up Dallas* from all claims, costs, liabilities, expenses or judgments, including attorneys' fees and court costs for any occurrences in connection with any dance instruction. I assume all risks to my child in connection with any instruction and further release *Dance Up Dallas* and its employees from liability for any injury sustained by my child while he or she is participating in the dance intensive, including all risks reasonably connected with such activity whether foreseen or unforeseen.

I understand that *Dance Up Dallas* is not responsible for personal property that is lost, damaged or stolen while I or my child is at or on Kitty Carter Dance Factory property.

I authorize and agree that *Dance Up Dallas* may take and use photographs, videos or likenesses of my child as needed for its record-keeping, advertising and/or public relations projects and that I have no rights to the same and will not be compensated for the same.

My signature is proof of my intention to execute a complete and unconditional waiver and release of all liability pursuant to the terms herein, and agreement as to all terms and conditions contained above. I am of lawful age and competent to sign this affirmation.

I HAVE FULLY INFORMED MYSELF AS TO THE CONTENTS OF THIS RELEASE AND HAVE READ THE SAME PRIOR TO SIGNING.

Signature of Participant's Parent or Guardian

Date

Printed Name of Participant's Parent or Guardian

