Alyson's School of Dance LLC - Release of Liability Form

Participants must sign /fill-out the Insurance waiver before participating in class.

ALL STUDENTS AND PARTICIPANTS IN CLASS MUST SIGN A WAIVER RELEASE FORM:

(Students under age 18 must have this signed by a guardian before class)

I_(STUDENT)	AGREE TO HOLD
ALYSON'S SCHOOL OF DANCE	E AND IT'S EMPLOYEES HARMLESS
IN THE UNLIKELY EVENT TH	HAT I INCUR AN INJURY DURING
PARTICIPATION IN A DANCE O	OR EXERCISE CLASS OR WHILE ON
THE PREMISES . THIS AGRE	EMENT WILL RELEASE ALYSON'S
SCHOOL OF DANCE FROM LIA	BILITY DURING MY PARTICIPATION
IN CLASS AND ANYTIME I, OR	ANY FAMILY MEMBERS ARE ON THE
PREMISES 188 Norwich Avenu	UE OR AT A VENUE IN WHICH ALYSON'S
SCHOOL OF DANCE MAY BE PERF	FORMING OR HOSTING AN EVENT. THIS
INCLUDES, RECITALS, REHEAR	SALS, COMPETITION AND ALL OTHER
ACTIVITIES . I UNDERSTAND TI	HAT WITH ANY PHYSICAL ACTIVITY
THERE IS A CERTAIN MINIM	IAL RISK FOR INJURY. I FURTHER
UNDERSTAND THAT AN EXIS	TING PHYSICAL CONDITION WILL
ELEVAT	E THAT RISK.
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Guardian /parents signature	date
Please print parent or guardian's name	
Participant(print)	
Phone number	
Emergency contact info:	
Email address:	

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