

WAIVER AND RELEASE OF LIABILITY In consideration of the risk of injury while participating in studio 360 Performing Arts, Inc. dance classes and/or rehearsals, and as consideration for the right to participate in the activity, I hereby, for myself, my heirs, assigns, or personal representatives, knowingly and voluntarily entered into this waiver and release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my because the participation in the activity, and he hereby release and forever discharge studio 360 Performing Arts, Inc. and Tiffanee Anthony located at Old Dominion University and 1620 Red Brook Ct. Norfolk, Virginia, respectively, their affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, successors and assigns, for any physical or psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, that I may suffer, including travel to and from an event related to this activity. I am voluntarily participating in the aforementioned activity and I am participating in the activity entirely at my own risk. I am aware of the risk associated with traveling to and from as well as participating in this activity. I understand that these injuries or outcomes may arise from my own or others negligence, conditions related to travel or the condition of the activity's locations. Nonetheless, I assume all related risks, both known or unknown to me, of my participation in this activity, including travel to and from and doing this activity. I agree to indemnify and hold harmless studio 360 Performing Arts, Inc. against any and all claims, suits or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorneys fees and any related costs, if litigation arises pursuant to any claims made by me or anyone else acting on my behalf. I can knowledge that studio 360 Performing Arts, Inc. and the directors, officers, volunteers, staff, representatives, and agents are not responsible for errors, omissions, acts or failures to act on any party or entity conducting a specific event or activity. I acknowledge that this activity may involve a test of a person's physical and mental limits and may carry with it the potential for serious injury, property loss, and or death. I acknowledge that I have carefully read this Waiver and Release and fully understand that it is a release of liability expressly agreed to release and discharge studio 360 Performing Arts, Inc. and Tiffanee Anthony and all of its affiliates, members, staff, volunteers, and assigns from any and all claims or causes of action and I agreed to volunteer really give up or waive any right that I otherwise have to bring a legal action against studio 360 Performing Arts, Inc. for personal injury or property damage.

Full Name _____ Address _____

Signature _____ Date _____

If this release is obtained from a presenter under the age of 19, then the signature of that presenter's parent or legal guardian is also required.

Parent's Signature _____ Date _____