KNK Dance Creations

**Waiver & Media Release Form**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the parent/guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am aware that participation in dancing is potentially dangerous and involves risk of injury. I understand that these risks include, but are not limited to injury to ligaments, muscles, tendons, bones, and other aspects of the body that may include head, neck, or spine. Due to the dangers of this activity, I understand the importance of my child/ dancer following the teacher’s instructions regarding techniques, training, and other rules and agree that my child/ dancer will obey these instructions. In consideration for allowing my child/dancer to participate in KNK Dance Creations activities, I hereby assume all the risks associated with the sport of dance, and I agree to release KNK Dance Creations, Instructors and any venue or facility that classes are held from all liability/responsibility which may arise in connection with my child’s/dancer participation in activities with KNK Dance Creations.

 **Media Release**

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ grant the permission for KNK Dance Creations to use the images of my child/dancer in brochures, newsletters, advertising, videos, and digital images such as posting to our website, Facebook, Instagram, or any other display.

 Parent’s/Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If I cannot be reached, please call the following:

Emergency Contact

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to student \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please Note: A medical release form must be filled out for each individual student who enrolls in KNK Dance Creations classes