*Carousel Dance Studio*

*23715 Roscoe Blvd.*

*West Hills, CA 91304*

*(818) 347-9926*

[*www.carouseldancestudio.com*](http://www.carouseldancestudio.com)

Student:

Parent/Legal Guardian:

I, (parent/legal guardian)

give my permission to , who is a fully vaccinated individual, to remove his/her mask while inside the dance room during classes at Carousel Dance Studio. They will continue to wear a mask while in any common areas with unvaccinated individuals while at the studio. I have also turned in a copy of his/her vaccination card.

Signature Date