

DanceSport Class

Kids Release Form

I hereby acknowledge that I have voluntarily chosen to participate in DanceSport classes conducted by Edyta Sliwinska, a professional dancer and instructor. I understand that these classes involve physical activity and that there are inherent risks associated with such activity.

I agree to assume all risks and responsibilities for any injuries or damages, known or unknown, which I may incur as a result of my participation in DanceSport classes. I acknowledge that it is my responsibility to consult with a physician before participating in any physical activity, and to inform Edyta Sliwinska of any medical conditions or physical limitations that may affect my ability to participate in the classes.

I agree to release and hold harmless Edyta Sliwinska, her affiliates, employees, and agents from any and all claims, liabilities, damages, and expenses, including attorneys' fees, arising out of or related to my participation in DanceSport classes.

I acknowledge that I have read and understand this DanceSport Class Release Form and that I am signing it voluntarily and with full knowledge of its significance.

Participant's Name: _____

Participant's (or Parent if participant is under 18) Signature: _____

Date: _____