



**Leap Studios Inc.**  
 #4108, 288 St. Moritz Drive SW  
 Calgary, AB T3H 0Z1  
 www.leapstudiosdance.com  
 403.862.1237

# DISCLAIMER CLAUSE FORM 2018/19

**Complete one *per family***

Please complete the following and return to the Instructor on or before the first class. This agreement must be completed in full before any participant may begin Activities.

**STUDENT 1**

FULL NAME : \_\_\_\_\_ D.O.B. (dd/mmm/yy) \_\_\_\_\_

**STUDENT 2**

FULL NAME : \_\_\_\_\_ D.O.B. (dd/mmm/yy) \_\_\_\_\_

**STUDENT 3**

FULL NAME : \_\_\_\_\_ D.O.B. (dd/mmm/yy) \_\_\_\_\_

**EMERGENCY CONTACT:**

\_\_\_\_\_  
 (name – please write clearly)

\_\_\_\_\_  
 (phone)

**Disclaimer Clause**

Leap Studios Inc, its officers, directors, agents, contractors, employees, coaches/instructors, trainers, volunteers, members and representatives (herein collectively referred to as “Leap Studios Inc”) is not responsible for any injury, loss or damage of any kind sustained by a person participating in any and Leap Studios Inc activities, events, performances, rehearsals or practice sessions (hereinafter collectively referred to as “Activities”) including injury, loss or damage which might be caused.

**Description of Risks**

In consideration of my child’s participation in the Activities of Leap Studios Inc, I acknowledge that I am aware of the possible risks, dangers and hazards associated with my child’s participation in the Activities of Leap Studios Inc. These risks include but are not limited to the following:

1. Injuries resulting in muscular or soft tissue injuries including sprains, strains, bruises, scrapes, cuts, etc.
2. Injuries resulting from the failure to properly use equipment or follow instructions, by my child or other participants;
3. Risk of experiencing fatigue, dizziness, fainting, etc. as well as the potential risk of further injury as a result of the above;
4. Injuries that may result from transportation accidents to and from the Activities of Leap Studios Inc.

**Release of Liability, Waiver of Claims and Indemnity Agreement**

In consideration of Leap Studios Inc allowing my child’s participation in its Activities, I agree as follows:

5. TO ASSUME AND ACCEPT ALL RISKS arising out of, associated with, or related to my participating in the Activities of Leap Studios Inc
6. TO WAIVE ANY AND ALL ACTIONS, CAUSES OF ACTION, CLAIMS AND DEMANDS FOR DAMAGES, LOSS OR INJURY that I have or may have in the future arising out of, or associated with or related to my child’s participating in the Activities of Leap Studios Inc
7. TO RELEASE LEAP STUDIOS INC from any and all liability for any loss, damage, injury or expense
8. TO HOLD HARMLESS AND INDEMNIFY LEAP STUDIOS INC from any and all liability for any damage to the property of, or bodily injury to, any third party, resulting from my participation in the Activities; and
9. TO FOLLOW the rules and instructions given by those responsible for an in charge of any Activities of Leap Studios Inc

**ACKNOWLEDGEMENT**

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTOOD THIS AGREEMENT, that I have executed this agreement voluntarily and that this agreement is binding upon myself, my heirs, executors, administrators and representatives.

SIGNED THIS \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
 Signature of Parent/Guardian

\_\_\_\_\_  
 Print Name of Parent/Guardian

\_\_\_\_\_  
 Signature of Witness

\_\_\_\_\_  
 Print Name of Witness