



**STEP 4 STEP SOUL LINE DANCERS SOCIAL CLUB
Liability Waiver and Acknowledgment of Risk**

1. I am participating in Line Dance Classes, Workshops and Events offered by Step 4 Step Soul Line Dancers, a NJ Non-Profit Corporation (“the Group”) during which I will receive information and instruction about Line Dancing. I recognize that Line Dancing requires physical exertion, which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in the Line Dance Classes, Workshops or Events. I represent and warrant that I am physically fit and I have no medical condition that would prevent my full participation in the Line Dance Classes or Workshops. I further understand that I should be aware of my physical limitations and agree not to exceed them.
3. In consideration of my participation in the Line Dance Classes, Workshops or Events, I agree to assume full responsibility for any risks, injuries or damages, known or unknown, which might incur as a result of participating in the program.
4. In further consideration of my participation in the Line Dance Classes or Workshops, I knowingly, voluntarily and expressly waive any claim I may have against Step 4 Step Soul Line Dancers, a NJ Non-Profit Corporation and its officers, agents, servants, employees and independent contractors for injury or damages that I may sustain as a result of participating in the program.
5. I further agree to indemnify and hold harmless and defend Step 4 Step Soul Line Dancers, a NJ Non-Profit Corporation and its officers, agents, servants, employees and independent contractors for any injuries including death, damages and losses sustained by me that arise out of, in connection with, or in any way associated with the activities of this program.
6. I consent and agree that all photographic images deemed appropriate by Step 4 Step can be used by the Group for promotional purposes in broadcast, print and/or any other forms of media.

My signature is proof of my intention to execute a complete and unconditional waiver of all liability, either on behalf of my minor child or on my own behalf, to the fullest extent of the law.

I have read, understood and agree to be bound by the above statements (If under 18, parents or legal guardian must sign):

STUDENT’S NAME (PRINTED): _____

SIGNATURE: _____ **DATED:** _____

EMERGENCY CONTACT INFORMATION:

NAME: _____

RELATION: _____ **PHONE:** _____

PRIMARY CLASS LOCATION: _____

INSTRUCTOR: _____