

## Tracy's Dance & Tumbling LLC Liability Release Form

I understand that there are risks of physical injury associated with, arising out of and inherent to the activity of dance and tumbling. In recognition of this acknowledged risk of injury, I knowingly and voluntarily waive all right and/ or causes of action of any kind, including any and all claims of negligence arising as a result of such activity from which liability could accrue to Tracy's Dance & Tumbling LLC, its' officers, agents, employees, instructors, subsidiaries, parent corporations, and all affiliated entities (hereinafter collectively referred to as "Tracy's Dance & Tumbling LLC". I hereby agree to release Tracy's Dance & Tumbling LLC and hold Tracy's Dance & Tumbling LLC harmless of all liability, and hereby acknowledge that I knowingly and voluntarily assume full responsibility for all risks of physical injury arising out of active participation in dance on behalf of the participant. I am aware that this is a release of liability and an acknowledgement of my voluntary and knowing assumption of the risk of injury. I have signed this document voluntarily and of my own free will in exchange for the privilege of participation. I understand that dance is a group sport, and exerts the body. By participating in classes, I assume all personal injury/sickness that may occur from dancing in group, private, or any other class forms. I will not hold Tracy's Dance & Tumbling LLC liable for any occurrences of sickness/injury.

I also give Tracy's Dance & Tumbling LLC permission to use my child's picture in or on any form of advertisement for Tracy's Dance & Tumbling LLC or a Tracy's Dance & Tumbling LLC affiliated event. If I am a minor, my parent and / or legal guardian has also signed this document releasing Tracy's Dance & Tumbling LLC from any and all such liability described above and has acknowledged that I am knowingly and voluntarily assuming all risks of injury inherent to this activity. The participant has my permission to participate in Tracy's Dance & Tumbling LLC. I warrant the below information is complete and correct. I further release Tracy's Dance & Tumbling LLC of all liabilities associated with my child's attendance at Tracy's Dance & Tumbling LLC.

Live & Recorded Video - yes: \_\_\_\_\_ no: \_\_\_\_\_

Photo permission yes - : \_\_\_\_\_ no: \_\_\_\_\_

I understand that classes will be held in person at the studio or via zoom when needed. I also understand that tuition cost will remain the same for in person or via zoom classes.

Parent/Self/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Participant's Name: \_\_\_\_\_

Please list any medications the participant is taking, and any other special medical instructions.

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