

Participant Liability Waiver

Please read this carefully. You are registering your student or yourself for participation in a movement class and you are waiving and releasing all claims for injuries you or your student might sustain.

I realize that participation in movement classes and activities could involve some possible personal injury. Despite precautions, accidents and injuries may occur. I certify to Trip the Light Arts that I am (18) years of age or older (or if a minor, I am a parent or legal guardian of the student) and physically and mentally capable of participating in classes, rehearsals, and performances. By signing this release form, I/we (the dancer and parent/guardian) assume all risks related to the use of any and all spaces used by Trip the Light Arts.

In the event of an emergency, I authorize the agents of Trip the Light Arts to administer or use their discretion in securing medical treatment. I understand that every effort will be made to contact (my spouse), the students parent, guardian, or emergency contact if an emergency occurs. I hereby release Trip the Light Arts and its teachers from liabilities for injuries or damages arising out of personal injury of any kind.

Instruction and Contact Consent: There may be times that teachers may need to touch the students to ensure proper body alignment, turn-out, and placement. I give permission for this instructional contact to be made as part of my/my students dance training. I understand that it is my responsibility to observe my student's dance instruction and I will report any concerns immediately.

I hereby grant permission for me and/or my student to be photographed or videotaped during class. Photography and video will be used as a learning tool and will be shared with students in class through the internet. Trip the Light Arts is permitted to use these materials for publicity, advertising, and sales promotion. I/we acknowledge that no promises of compensation are made by Trip the Light Arts for such use.

Furthermore, I/we agree to obey the class and facility rules and take full responsibility for my/our behavior in addition to any damage I/we may cause to the facilities utilized by Trip the Light Arts.

By my signature below, I certify that I or my minor student is physically able to participate in Trip the Light Arts classes and do hereby agree that this business, owners, and employers are not liable to me, my heirs, next of kin, assigns or personal representatives for any personal injury, accident, death, and/or loss or damage to personal property even if their individual or collective negligence contributes to such death, injuries or damages. I do hereby release this business and its employees from any claim or cause of action which may have occurred as a result of my or my minor student's participation in classes or as a result of any medical problems known or unknown which may occur in the future. I agree to waive and relinquish all claims I or my minor student may have against Trip the Light Arts.

I have read and fully understand the above waiver.

Student's Name: _____ Age: _____
(Print)

Student's Signature: _____ Date: _____
(If unable to sign, parent/guardian sign only)

Parent/Guardian Name: _____ Phone: _____
(Print)

Parent/Guardian Signature: _____ Date: _____