



Waiver of Liability

Thank you for participating in a Class Act Dance sponsored activity! Please read the following waiver carefully. By signing this document you acknowledge that you have read, understand and agree to comply with policies stated below:

WAIVER OF LIABILITY

1. Dancing, stretching, or performing is a physical activity.
2. Class Act Dance and their instructors will be held harmless for any personal injuries; loss of or damage to personal property occurring at its place of business or at any venue where they may be rehearsing or performing.
3. I acknowledge policies held by Class Act Dance which recommend doctor examinations for students, especially under 13 years of age, before participating in any activity which may cause or progress any injury or limitations the student may have; to consult with a physician before participating in any activity if I have any doubt as to my, or my child's physical abilities.
4. Class Act Dance cannot dispense any medications, including aspirin.

I have read and agree to the policies stated above:

Class Title/Day/Time		Date
Parent Name (please print)		Student Name
Address, City, State, Zip		
Email		Phone
Signature		
How did you hear about us?		

___ Occasionally, Class Act offers promotions, discounts and generates announcements regarding upcoming events to our community via email. Please place a checkmark here if you **do not** wish to receive these messages. The option to opt-out at a later time is always available.