

Name: _____

Agreement and Release from Liability
By Dance Participant

Class: _____

Voluntary Participation

I, _____ (name of dance participant who is at least 18 yrs of age), acknowledge that I have voluntarily applied to engage in dance and dance-related activities at the premises of the North Coast Dance studio located at 426 F Street, Eureka, California.

Assumption of Risk

I AM AWARE THAT DANCE AND DANCE-RELATED ACTIVITIES ARE A HAZARDOUS ACTIVITY. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE DANGER INVOLVED, AND I HEREBY AGREE TO ACCEPT ANY AND ALL RISKS OF INJURY OR DEATH, FROM ANY CAUSE OR SOURCE WHATSOEVER AND VERIFY THIS STATEMENT BY PLACING MY INITIALS HERE: _____

Release

As consideration for myself being permitted by North Coast Dance or one of its affiliated organizations to participate in these activities and use their facilities, I hereby agree that I, will not make a claim against, sue, or attach the property of North Coast Dance or any of its affiliated organizations (or the supplier of any of the equipment used in these activities) for injury or damage resulting from the negligence or other acts, howsoever caused, by any employee, agent, director, officer or contractor of North Coast Dance or any of its affiliated organizations as a result of my participation in dance and dance-related activities.

I hereby agree to hold harmless North Coast Dance and its agents from any and all claims arising out of my participation in any activities whatsoever. I waive any potential claims against North Coast Dance, its contractors, employees and agents.

AUTHORIZATION

I, _____, am a dance participant of at least 18 yrs of age, who was born on _____. I hereby authorize North Coast Dance, to contact the following in case of emergency:

Emergency Contact

Name: _____

Phone number: _____

Address, City, State, Zip: _____

Signed: _____ Date: _____

Dance Participant

Dance Participant Contact Information

** Please no abbreviations (with the exception for state)! Please list everything in full.*

Address, City, State, Zip: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

E-mail: _____

Knowing and Voluntary Execution

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND NORTH COAST DANCE AND/OR ITS AFFILIATED ORGANIZATIONS AND SIGN OF MY OWN FREE WILL.

Executed at _____ in _____, California on _____.
Location City Date

All parents and/or legal representatives are to sign:

Signature of Dance Participant, age 18yrs or older

Declaration of Witness

I certify that _____ (dance participant) acknowledged in my presence that he / she had read and fully understood the meaning and consequences of the foregoing release, and signed it in my presence.

Witness Signature

