

CENTER STAGE DANCE ACADEMY

Waiver Form

NAME: _____

ADDRESS _____

EMAIL: _____

PHONE: _____ **CELL:** _____

EMERGENCY CONTACT: _____ **PHONE:** _____

WAIVER OF LIABILITY

“ I, the parent and/or legal guardian of the above-named dancer(s), hereby give permission for said dancer(s) to participate in all classes, programs, shows, recitals and events offered or conducted by CSDA, Inc. d/b/a Center Stage Dance Academy. For myself and said dancer(s), I acknowledge and accept all risks associated with such programs, classes and events, including the possibility of serious physical harm or injury. For fair consideration, I hereby release and indemnify CSDA, Inc., Its employees, or unknown, now existing or hereafter arising, sustained or suffered in connection with said dancer(s)'s participation in any such class, program, event or recital. Further, I grant permission to CSDA, Inc. to use photographs and/or videos of said dancer(s) as deemed appropriate or fit by CSDA, Inc. in the operation of its business.”

SIGNATURE _____ **DATE** _____

CENTER STAGE DANCE ACADEMY

Waiver Form

NAME: _____

ADDRESS _____

EMAIL: _____

PHONE: _____ **CELL:** _____

EMERGENCY CONTACT: _____ **PHONE:** _____

WAIVER OF LIABILITY

“ I, the parent and/or legal guardian of the above-named dancer(s), hereby give permission for said dancer(s) to participate in all classes, programs, shows, recitals and events offered or conducted by CSDA, Inc. d/b/a Center Stage Dance Academy. For myself and said dancer(s), I acknowledge and accept all risks associated with such programs, classes and events, including the possibility of serious physical harm or injury. For fair consideration, I hereby release and indemnify CSDA, Inc., Its employees, or unknown, now existing or hereafter arising, sustained or suffered in connection with said dancer(s)'s participation in any such class, program, event or recital. Further, I grant permission to CSDA, Inc. to use photographs and/or videos of said dancer(s) as deemed appropriate or fit by CSDA, Inc. in the operation of its business.”

SIGNATURE _____ **DATE** _____