

Center Stage Dance Academy

Bring A Friend Form

Dear _____

You are invited by _____

To attend his/her dance class on _____

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.”

Parent/Guardian Signature: _____ Date: _____



"Dreams Do Come True"

116 Long Pond Road
Plymouth, MA
508-746-0991

116 State Road
Sagamore Beach, MA
508-888-2640

www.centerstagestudios.net