



# **IN MOTION**

D A N C E

## Liability Waiver and Acknowledgment of Risk

**READ AND SIGN BELOW**

**MUST BE COMPLETED WITH SIGNATURE BEFORE CLASS**

I understand and agree that in participating in any dance class, workshop, rehearsal or performance, there is a possibility of physical injury or death. I voluntarily agree, therefore, to assume all risks and responsibility for any such injury or accident, which might occur to my child or me during any In Motion Dance classes, rehearsals, performances, or activities. I also exempt, release, and indemnify In Motion Dance, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students from any and all liability claims, demands, or causes of action whatsoever from any damage, loss, injury, or death to me, my children, or property which may arise out of or in connection with participation in any classes or activities conducted by In Motion Dance. I further hereby voluntarily agree to waive my rights and that of my heirs and assigns to hold In Motion Dance, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students liable for such damage, loss, injury, or death. I understand that I should be aware of my physical limitations and that of my children and agree not to exceed them. In the event of an emergency if the guardian is unable to be contacted, I authorize In Motion Dance to act on my behalf. If I am signing this waiver for my children, I certify that I am the parent or legal guardian and have the right to waive these rights.

By signing this waiver, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by my mere presence within this establishment and that such exposure or infection may result in injury or illness. I understand that the risk of becoming exposed to or infected by COVID-19 may result from the actions, omissions, or negligence or myself and others, including but not limited to, employees, volunteers, and program participants and their families. I hereby release In Motion Dance from any and all claims arising from or in connection with any direct COVID-19 impact while visiting.

Permission is granted to In Motion Dance to use photographs or videos of students for publicity purposes.

I have read, understand, and agree to be bound by the above statement. Please print your name, sign, and date.

PARENT PRINTED: \_\_\_\_\_

SIGNED: \_\_\_\_\_  
(If under 18, parents or legal guardian must sign)

FOR: \_\_\_\_\_  
(Name of student)

DATED: \_\_\_\_\_