



FIRST STEPS DANCE PROGRAM

Birthday Party Waiver

****This form MUST be signed by parent/guardian to allow participation****

LIABILITY RELEASE:

By signing this form, I understand and acknowledge that instruction, classes, practice, performance, community events, and all other activities related to dance and arts education are inherently potentially dangerous activities. As such, I permanently release First Steps Dance Program on behalf of myself, my children, relatives, heirs, etc. from any negligence on behalf of First Steps Dance Program, its employees, guest teachers, agents, etc. and from all liability arising from injuries and damages including but not limited to muscle strain, fatigue, serious bodily harm, and/or death which I or my child incurs while engaging in such activities.

If signing for a minor child, you are releasing liability on behalf of that child and asserting that you are the child's parent, relative, guardian, or authorized agent.

POLICY ACKNOWLEDGEMENT

By signing this form, I acknowledge that I have read, understand and agree to First Steps Dance Programs policies regarding the liability release.

Student's Name: _____ Age: _____

Parent's Name (Printed): _____

Email: _____

Home Address: _____

Phone #: _____

Parent's Signature: _____ Date: _____