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WAIVER OF LIABILITY RELEASE FORM All participants <u>MUST</u> complete this form

All participants and students must complete this form before participating in any dance classes or related activities with D'Air Dance Collective. If the participant is under age 18, a parent or guardian must also sign this form.

Please understand admission to class or related activities will not be granted if this form is not received prior to class nor properly signed or dated.

This agreement is between Jessica Mannara (herein: D'Air Dance Collective) and the Dancer.

- 1. I recognize and understand that dancing requires physical exertion, which may be strenuous and may cause physical injury. I fully understand the risks of physical injury inherent to dance, dance training, and related activities and I fully assume those risks involved.
- 2. I represent and warrant that I am in good physical condition and have no medical condition and or/allergies that would prevent and/ or limit my full participation in the Dance Program. I understand that it is my responsibility to consult with a physician prior to and in regards to my participation in the Dance Program.
- 3. I certify that I have not been advised against participating in dance, dance training or related activities, such as, but not limited too, the Dance Program, by a qualified health professional.
- 4. In consideration of being permitted to participate in the Dance Program, I agree to assume full responsibility for any risks, injuries and/or damages, known or unknown, which might incur as a result of participation in the Dance Program.
- 5. I am aware that this is a release of liability and knowingly, voluntarily and expressly waive any claim I may have against D'Air Dance Collective for injury or damages that I may sustain as a result of participation in the Dance Program or in connection with any instruction from D'Air Dance Collective and its employees and/or contractors, inclusive of, dance teachers and staff members, while I am enrolled in the program.

- 6. I further understand I am waiving certain legal rights and agree to be forever prevented from suing or otherwise claiming against D'Air Dance Collective and it's providers for any personal injury that I may sustain during my participation in the Dance Program.
- 9. This Agreement will be governed and construed in accordance with the law of the Province of Ontario.

I acknowledge and represent that I have fully read and understood this Agreement and I agree to conform and comply with this Agreement in its entirety. I sign this document voluntarily and I am aware this document is legally binding and that I am waiving certain legal rights. I further understand that D'Air Dance Collective permitting me to participate in any dance classes or related activities accepts my statements on this Agreement.

PLEASE PRINT CLEARLY

| Dancer's Name: | - |
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| Dancer's Signature: | Date: |
| Name of Parent/ Guardian (if under 18): | |
| Signature of Parent/ Guardian (if under 18): | |
| Date: | |
| Home Address: | |
| Phone Number: Email Address: | |
| Emergency Contact: | |
| Emergency Contact Number: | |
| Relationship to Dancer: | |