



EXPRESS Dance & Acrobatics Liability Release



132 Central Street Milford, MA 01757 / 508-478-9222 / www.expressdanceandacro.com
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Your child, _____, has been invited to join us on 'Bring A Friend' day. Please fill out completely & bring this important document when dropping your child off for class(s). We can't wait to see you!

Child's Name (first/last): _____

Age: _____ Birthdate: _____

Parent/Guardian: _____

Home Phone: _____ Cell Phone: _____

Address: _____ City: _____ Zip: _____

E-mail Address _____

Allergies/Medical Issues/Medicine being taken/Restrictions:

EMERGENCY CONTACT: _____ CELL: _____

____ WAIVER OF LIABILITY & INJURY: As the legal parent or guardian, I release and hold harmless EXPRESS Dance and Acrobatics, its owners and operators from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant and/or the undersigned, while in or upon the premises or any premises under the control and supervision of EXPRESS Dance and Acrobatics, its owners and operators or in route to or from any of said premises. This will apply to my child and/or any child that may accompany me in an enrolled or non-enrolled capacity.

____ WAIVER OF PHOTOGRAPHY: I give permission to EXPRESS Dance & Acrobatics LLC to photograph and video my child and use the photos/videos for marketing purposes, including brochures, advertisements, social media, EDA website and news articles.

I understand and agree to the terms of this Waiver Agreement

Parent/Guardian of minor student

Date Signed