



# EXPRESS Dance & Acrobatics Liability Release



132 Central Street Milford, MA 01757 / 508-478-9222 / [www.expressdanceandacro.com](http://www.expressdanceandacro.com)

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 \_\_\_\_\_

**EMERGENCY CONTACT:** \_\_\_\_\_ **CELL:** \_\_\_\_\_

Allergies/Medical Issues/Medicine being taken/Restrictions:  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ **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.

\_\_\_\_ **COVID 19 RELEASE WAIVER**

I release EXPRESS Dance & Acrobatics LLC, it's instructors, independent contractors, and all other associates from liability for harm, theft, or injury that may be suffered by me and/or members of my family traveling to or from or during participation in activities and programs sponsored by EXPRESS Dance. & Acrobatics LLC. I hereby acknowledge that I am voluntarily assuming full responsibility for all risks of physical injury arising out of active participation in a dance class cheer, camp, or other dance related activities. I acknowledge the contagious nature of COVID-19 and other contagious diseases and viruses and voluntary assume the risk that I and/or my children may be exposed to or infected by COVID-19 by attending and participating and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 and other contagious diseases and viruses may result from the actions, omissions, or negligence of myself and others, including, but not limited to, employees, independent contractors, volunteers, and program participants and their families. I release EXPRESS Dance. & Acrobatics LLC its instructors, independent contractors and all associates from liability for harm, injury or death pertaining to COVID-19 and other contagious diseases and viruses. I understand that there are NO refunds for registration fees, costumes or classes. I understand and agree to EXPRESS Dance. & Acrobatics LLC policies and procedures. I understand that my student must have this release form signed before attending classes, clinics or camps

I understand and agree to the terms of this Waiver Agreement

\_\_\_\_\_  
Parent/Guardian of minor student

\_\_\_\_\_  
Date Signed