

OVATION

Performing Arts Studio

Parent Release Form/Liability Waiver

Student Name: _____

Parent/Guardian Name: _____

I wish to enroll myself/my student in *Ovation Performing Arts Studio*. I understand that dance is a sport and with that comes the possibility of risk and injury, and by enrollment of myself/my student, I understand, acknowledge and accept those risks and agree to release and hold *Ovation Performing Arts Studio* harmless for an physical injury, claim, or cause of action incurred as a result of instruction of *Ovation Performing Arts Studio*, its agents, employees, or guest teachers. I further agree to hold harmless and suit, claim, or cause of action which might accrue to any minor for which I am the legal guardian, for any personal injury or loss incurred as a result of instruction given under the supervision of *Ovation Performing Arts Studio*.

Signature: _____ Date: _____

(Parent signature if student is under 18 years of age)

Health Information:

Please use the space below to list any health problems or information that we should know about your student or check the space for no medical conditions:

My student has no medical conditions

Parent Initial each statement:

I give Ovation Performing Arts Studio permission to have my student's individual picture posted on the Ovation web site, facebook, twitter, Instagram. (optional)

I give Ovation Performing Arts Studio permission to have my student photographed or video-tapes during a class or lesson for advertising and promotional reasons/purposes. (optional)