

# SOLEUNIQUE DANCE COMPLEX

## Welcome to Sole Unique Dance Complex

Dancer Name: \_\_\_\_\_ Age: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you hear about us: \_\_\_\_\_

Interests: \_\_\_\_\_

### **Risk and Waiver of Liability**

I hereby release, and agree to hold harmless Sole Unique Dance Complex, its owners, agents and assigns, from and against any loss, damage, illness (including, but not limited to Covid-19) or personal injury arising from or related to my or my child(ren)'s presence or participation in activities upon and around the Facilities, whether caused by myself, my child(ren), or any other party, and I hereby assume full responsibility for any risk of such loss, damage, illness (including, but not limited to Covid-19) or personal injury. I recognize and acknowledge that there are certain inherent risks in physical activities, like dance and related exercises, and that dance education and instruction involve kinetic corrections which may necessarily include physical touching. Sole Unique Dance Complex will take measures to provide social distancing in each class, but due to the nature of dance it may not be possible to maintain social distancing at all times. I further agree and acknowledge that I am responsible for any and all damages to the facilities, other property or persons as may be caused by any negligent, reckless, or willful actions by my child(ren) or myself. I understand the nature of the activities which I or my child(ren) will be participating in and agree that it is my responsibility to ensure that I or my child(ren) are in proper physical condition to participate.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_