

PHYLLIS GUY DANCE CENTER
Liability Waiver Form

THIS WAIVER MUST BE SIGNED AND RETURNED BEFORE YOUR CHILD ATTENDS HIS/HER FIRST CLASS

I/we realize that participation in dance classes and activities could involve some possible personal injury. Despite precautions, accidents and injuries may occur. By signing this release form, I/we (the dancer and parent/guardian) assume all risks related to the use of any and all spaces used by Phyllis Guy Dance Center.

I/we agree to release and hold harmless Phyllis Guy Dance Center including its teachers, dancers, staff members, and facilities used by both entities from any cause of action, claims, or demands now and in the future. I/we will not hold Phyllis Guy Dance Center liable for any personal injury or any personal property damage, which may occur on the premises before, during or after classes. Furthermore, I/we agree to obey the class and facility rules and take full responsibility for my/our behavior in addition to any damage I/we may cause to the facilities utilized by Phyllis Guy Dance Center.

I understand that Phyllis Guy Dance Center is a licensed and insured business. In the event that I/we should observe any unsafe conduct or conditions before, during or after my/our classes, I/we agree to report the unsafe conduct or conditions to the Owner, Director, Instructor or Staff member as soon as possible.

I understand that my child will be picked up immediately by parent or guardian following his/her last class of the night. If my child is absent from 6 or more classes during this dance year, she/he may not be allowed to participate in the end of the year recital, no refunds for tuition and/or costumes will be refunded.

If I wish to discontinue any dance classes during the year, a written notice must be given to the PGDC Office Manager Thirty (30) days prior to last class clearly stating change in class(es). Tuition fees will continue until receipt of notice is received or Recital Date.

Dancer's Name: _____ Age: _____

(Print)

Dancer's Signature: _____ Date: _____

(If unable to sign, parent/guardian sign only)

Parent/Guardian Name: _____ Phone: _____

(Print)

Parent/Guardian Signature: _____ Phone: _____