



Bring An Adult Week

205 S. Main Street Suite 15-02, Red Oak, TX 75154
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ADULT'S NAME _____ STUDENT WHO INVITED YOU _____

EMERGENCY CONTACT _____ PHONE NUMBER _____

GENERAL RELEASE FORM

In consideration of the above named students/participants participating in the programs of DANCEXPRESSIONS, I represent that I understand the nature of the above enrolled activities and that I am or my children are qualified, in good health, and in proper physical condition to participate in such activities. I acknowledge that if I believe event conditions are unsafe, I or my children will immediately discontinue participation in the activities. I fully understand that these activities involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my or my children's own actions, or inactions, those of others participating in the activities, the conditions in which the activities take place, or the negligence of the "releasees" named below; and that there may be other risks either result or my or my children's participation in these activities. In the event of a medical emergency, I authorize the agents of DANCEXPRESSIONS to use their discretion in securing proper treatment for a student, as deemed necessary under the circumstances. I understand that every effort will be made to contact a parent or guardian of student under such circumstances. I hereby release, discharge, and covenant not to sue DANCEXPRESSIONS, its respective owners, partners, administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the Activity takes place, (each considered one of the "RELEASEES" herein) from all liability, claims, demands, losses, or damages, on my account caused or alleged to be caused in whole or in assumption of risk I, or anyone on my behalf, makes a claim against any of the Releasees, I will indemnify, save, and hold harmless each of the Releasees from any loss, liability, damage, or cost, which any may incur as the result of such claim. I have read the RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it to be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

SIGNED _____ DATE _____