**Jeannette’s School of Dance Photo & Liability Release Form**

I understand that there are risks of physical injury associated with, arising out of and inherent to the activity of dance. In recognition of this acknowledged risk of injury, I knowingly and voluntarily waive all right and/ or causes of action of any kind, including any and all claims of negligence arising as a result of such activity from which liability could accrue to Jeannette’s School of Dance, it’ officers, agents, employees, instructors, subsidiaries, parent corporations, and all affiliated entities (hereinafter collectively referred to as “Jeannette’s School of Dance”.

I hereby agree to release Jeannette’s School of Dance and hold Jeannette’s School of Dance harmless of all liability, and hereby acknowledge that I knowingly and voluntarily assume full responsibility for all risks of physical injury arising out of active participation in dance on behalf of the participant.

I am aware that this is a release of liability and an acknowledgement of my voluntary and knowing assumption of the risk of injury. I have signed this document voluntarily and of my own free will in exchange for the privilege of participation.

I also give Jeannette’s School of Dance permission to use my child’s picture in or on any form of advertisement for Jeannette’s School of Dance or a Jeannette’s School of Dance affiliated event. With permission from parents these photos or video may be included for Jeannette’s School of Dance publications or advertisements, including on our websites and social media. To ensure privacy, specific names of children will not be included. No financial compensation shall be given for use of any photographs or video. I acknowledge that Jeannette’s School of Dance may choose not to use my photo or video at this time, but may do so at its own discretion at a later date. Jeannette’s School of Dance reserves the right to discontinue use of photos or video without notice. I have read this release and I understand its contents. I consent to and authorize the use of Jeannette’s School of Dance, or anyone authorized by Jeannette’s School of Dance, of any and all photographs or video which have been taken of my child/children.

If I am a minor, my parent and / or legal guardian has also signed this document releasing Jeannette’s School of Dance from any and all such liability described above and has acknowledged that I am knowingly and voluntarily assuming all risks of injury inherent to this activity.

The participant has my permission to participate in Jeannette’s School of Dance Events. I warrant the below information is complete and correct. I further release Jeannette’s School of dance of all liabilities associated with my child’s attendance at Jeannette’s School of Dance.

Parent/ Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please list any medications the participant is taking, and any other special medical instructions. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_