

Equilibrium Dance Academy, LLC

Hold Harmless Agreement

In consideration for my child being permitted to participate in Equilibrium Dance Academy, LLC program, I/We _____ parent(s) and/or legal guardian(s) of _____ agree to the following provisions:

Acknowledgement of Risks: I/We understand that there are numerous risks associated with participating in dance activities, including those risks present during classes and activities. Some of the specific risks include falls and tripping which may lead to accidents resulting in, but not limited to, mild to severe bodily injury. I/We understand that Equilibrium Dance Academy, LLC cannot be responsible for any injuries or damages experienced by my/our child during her/his participation in such activities.

Medical Care: In an emergency situation, when parental permission is not available, I/We hereby grant and give my/our permission for a staff member at Equilibrium Dance Academy, LLC to seek emergency medical treatment for my/our child. In my/our absence or inability to communicate with emergency and hospital personnel, I/We hereby grant the Equilibrium Dance Academy, LLC authority to release for the purposes of providing medical treatment, my/our child to the care of medical personnel or physicians as Equilibrium Dance Academy, LLC determines as reasonably appropriate.

Media Relations: By signing the Agreement, I/We consent and give permission to Equilibrium Dance Academy, LLC, and those acting under authority, to use the name or likeness of my/our child for the purpose of marketing the studio to the media.

Release, Covenant Not to Sue, Waiver of Liability and Indemnification Provisions (Parents of Minors): I/We have read and clearly understand the terms of this Agreement. I/We give my/our child permission for my/our child to participate in all Equilibrium Dance Academy, LLC activities, including those described above. I/We also release and hold harmless Equilibrium Dance Academy, LLC, its directors and employees, and those acting under its authority, from all actions, claims and liabilities relating to my/our child's participation in any and all programs.

I further agree to indemnify and hold harmless and defend Miss. Angelica Spilis, Equilibrium Dance Academy, LLC, its teachers, staff and employees from injuries, damages, and losses sustained by me or my child arising out of, connected with, or in any way associated with the activities of the program(s). **I have read and fully understand the above program details and waiver and release of all claims.**

Sign: _____

Date: _____

