

Waiver must be completed by all participants (parent or legal guardian if under 18 years old) and returned to Intrigue Dance Intensive, Inc. administration at least two weeks prior to the start of below event date via mail or email

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EVENT:		EVENT DATE:
	STUDIO:	
risks of serious injury (including paralysis their own behalf, unequivocally agree to the Participant is healthy and has no ph I, Participant (and the Minor Participant covenant not to sue, and agree to inder event will be held (hereinafter collective experienced, is experiencing, or may exarising out of, directly or indirectly, the obtain necessary medical treatment for this waiver and release is binding not or or accident of every sort and nature, whe part to the negligence of a Releasee or Furthermore, if anyone (Participant, Mirelease, then the undersigned agree to incur in result of any such claim.  A chaperone or adult of 21 years or old Intensive, Inc. is not responsible for any I, the undersigned, represent, acknowle understand that all checks returned from I understand that Intrigue Dance Intensice photography and/or videotaping. There successors, assignees, licensees and spot I, in my own behalf of the Participant, hehalf of the Participant, am aware that risk of injury or illness. I further acknow The CDC advises that older adults and in level in determining whether to attend. contraction. We cannot guarantee that	is or death) with or without the negligence of others. Participal incur and assume such risks as a condition to participation sysical or mental condition that would impair Participant's abet's parent/legal guardian on behalf of Minor and on their ownify and hold harmless Intrigue Dance Intensive, Inc. (as we'ely "Releasees") from any and all liability, loss, cost, expense perience in the future, for personal injuries, known or unknoactivity for which Participant is registered or permitted to ere Participant and hereby, in my own behalf of the Participant, and on the undersigned, but also upon their heirs, representantether related to the permitted activity, the equipment, the other Participant.  In or's parent/legal guardian or anyone on behalf of Participant indemnify and hold harmless each of the Releasees from any ere is required to attend with Participants 15 years old or you'r Participants' supervision.  Participants' supervision.  Participants' supervision.  Participants' supervision or limitations, on my behalf and or onsors, the exclusive right to utilize any and all photographs ereby warrant that I have read in its entirety and fully under this Release and Wavier releases any Releasees from liability ledge that nothing in this document constitutes a guarantee mmunocompromised individuals of any age might be at a high municipal participants at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a high munocompromised individuals of any age might be at a hight munocompromised individual	gher risk for severe illness from COVID-19. Attendees should evaluate their own risk if they are infected, and any interaction with the general public raises the risk of
Child Name	Parent Name	Parent Signature
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TEACHER/STUDIO OWNER SIGNATURE \_\_\_\_\_\_ DATE \_\_\_\_\_\_ PAGE \_\_\_\_\_ of \_