



SUMMER CAMPS 2010 WAIVER FORM

Student Name: _____ Birthdate: _____

(Please Print)

(DD/MM/YYYY)

Spiral Dance offers an environment that is safe and nurturing for students participating in our Summer Camp Programs. Dance is a physical activity and there can be risks involved. It is important to let your child understand the importance of listening, following directions, and absolutely no fooling around. Your child will only be allowed to attempt a more difficult task under the discretion of the instructor. As always we ensure a safe and fun experience for you child. Please read and sign the following waiver.

My child has permission to attend the Summer Programs at Spiral Dance.

I the undersigned, for heirs, executors, administrators and myself waive and release any and all rights for personal injury, loss of damage I may have against Spiral Dance Co. Ltd. And their respective agents for any and all injuries suffered by my use of their facility. I agree to follow the policies of the studio as outlines and I hereby agree to the above contract between Spiral Dance Co. Ltd and myself.

Parent/Guardian Name: _____ Date: _____

(Please Print)

Signature: _____
