Amy Hamilton's Dance Arts Waiver and Release Form 2019/2020 Season

I,	(PRINT YOUR NAME) have chosen to
have my child,	(PRINT CHILD'S NAME), participate
in dance instruction given by Amy Hamilton and	those associated with Amy Hamilton/Amy Hamilton's
	nature of the activities my child will be participating
in and that my child is in the proper physical of	condition and capable of participating in the related
	l those affiliated with Amy Hamilton's Dance Arts are
not in any way responsible for making such a d	letermination. I am advised that the involvement of
	ect the participants dance placement will be executed.
I understand and agree on behalf of myself and n	ny child, to release, hold harmless, and discharge Amy
Hamilton, Amy Hamilton's Dance Arts and those	e associated with Amy Hamilton's Dance Arts from all
	s, including attorneys' fees and court costs for any
occurrences in connection with any dance instruc	ction. I assume all risks to my child in connection with
	ton, Amy Hamilton's Dance Arts and its owners and
	by my child while he or she is enrolled in any dance
	bly connected with such activity whether foreseen or
	nd those instructors associated with Amy Hamilton's
	r other children under my supervision who are left
	rounding the class space and that Amy Hamilton will
only be supervising my child when he or she is pa	articipating in scheduled dance activities, programs or
	my Hamilton's Dance Arts and those associated, are
	st, damaged or stolen while I or my child is on the
	esponsibility to maintain my own accident and health
	erage for myself and my child participating in Amy
Hamilton's Dance Arts activities and that Amy Hamilton's Dance Arts does not provide accident or	
health insurance for those participating in its instruction, activities or programs. I authorize and agree	
that Amy Hamilton and news media may take and use photographs, videos or likenesses of myself or	
my child as needed for its record-keeping, advertising and/or public relations projects and that I have	
no rights to the same and will not be compensated for the same. My signature is proof of my intention	
to execute a complete and unconditional waiver and release of all liability pursuant to the terms herein,	
and agreement as to all terms and conditions contained above. I am of lawful age and competent to sign this affirmation.	
tills affirmation.	
I HAVE FULLY INFORMED MYSELF AS TO THE C	ONTENTS OF THIS RELEASE
AND HAVE READ THE SAME PRIOR TO SIGNING.	
Signature of Participant's Parent or Guardian	Today's Date
Printed Name of Participant's Parent or Guardian	
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Dancer's Name