



Liability 2018

I assume all of the risks of participating in all activities and events through, or at, Suzanne's School of Dance. I certify that I am physically fit and have not been advised to not participate in activities by a qualified medical professional. I certify that there are no health-related reasons or problems which would be dangerous for me to participate.

I release and discharge any and all liability. All directors, instructors, employees, owners, and property owners and acknowledge that they are not responsible for any injury or property loss at Suzanne's School of Dance.

(Name Dancer / Participant)

(Name Parent / Guardian)

(Signature)

(Date)