WAIVER AND RELEASE OF LIABILITY

I,[print your name] ha	ave chosen to
have my child(ren)	
[print child's name],	
participate in dance instruction given by Sole Expressions Dance Studio Coopera as follows:	tive and agree
I am aware of the risks inherent in dancing. Injuries might result from direct trau of feet, ankles, lower legs, low back, hip, and neck. Injuries might include stress tendon injuries, meniscus tear of the knee, sprains and strains. Additionally, slips hard floor may cause injuries to the face including broken teeth.	fractures,
I am aware of the risk that these and other injuries might be caused by the neglige and staff members of Sole Expressions Dance Studio Cooperative.	ence of teachers
I acknowledge and am aware of the contagious nature of COVID-19 and voluntar risk that we may be exposed to or infected by COVID-19 by participation. This exposed infection may result in personal injury, illness, permanent disability, and death. If the risk of becoming exposed to or infected by COVID-19 while at Sole Expressi Studio Cooperative may result from the actions, omissions, or negligence of ourse others, including, but not limited to Sole Expression Dance Studio Cooperative envolunteers, and program participants and their families.	exposure or understand that ons Dance elves and
I, on behalf of myself and my child(ren), hereby release, waive and discharge Sol Dance Studio Cooperative, its teachers and staff members, from liability for negli personal injury, death, or property damage to my child while participating in danc including events held outside the studio.	igence causing
I have considered that without this waiver of liability, the cost for my child's/chil the facility and participation in the dance class would be considerably higher and to pay a considerably higher cost, I waive the right to bargain for different waiver terms. I freely choose to sign this release and pay the fee to enroll my child(ren) class.	as I do not wish of liability
Signature of Parent or Guardian:	
Date:	