



Liability Release Form

I understand and agree that in participating in any dance class, workshop, rehearsal or performance, there is a possibility of physical injury. I voluntarily agree, therefore, to assume all risks and responsibility for any such injury or accident, which might occur to me or my child during any of the Lucid Dance Company LLC classes, rehearsals, performances, or activities. I also exempt, release, and indemnify Lucid Dance Company LLC, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students from any and all liability claims, demands, or causes of action whatsoever from any damage, loss, or physical injury, to me, my children, or property which may arise out of or in connection with participation in any classes or activities conducted by Lucid Dance Company LLC. I further hereby voluntarily agree to waive my rights and that of my heirs and assigns to hold Lucid Dance Company LLC, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students liable for such damage, loss, or injury. I understand that I should be aware of my physical limitations and agree not to exceed them. If I am signing this waiver for my children, I certify that I am the parent or legal guardian and have the right to waive these rights.

The participant has my permission to participate in Lucid Dance Company LLC events. I warrant the below information is complete and correct. I further release Lucid Dance Company LLC of all liabilities associated with my child's attendance at Lucid Dance Company LLC.

Parent/ Guardian Signature Date

Participant's Name Date

Please list any medications the participant is taking, and any other special medical instructions:

