



Kinderdance Birthday Party Participation Waiver

DATE: _____ CHILD'S FULL NAME: _____

Liability Waiver: I realize that any program such as Kinderdance® and its affiliated programs which involve movement and motion can result in physical injury. I permit my child to participate in Kinderdance® and release Kinderdance® International, its owners, employees, Kinderdance® Franchisees, Instructors and staff from all liability for injury to my child from his/her participation in this program. Furthermore, I agree to allow Kinderdance® International or local Kinderdance® Franchisees to use the name and likeness in photographs and/or video of my child for advertising and promotional purposes without compensation to my child or myself. Tuition is due monthly in advance and covers my child's enrollment for that month or any portion of that month. I have read and will abide by the parent and student rules and regulations outlined in the Kinderdance® General Information Brochure and other communications listing additional policies or changes in policies.

Parent or Legal Guardian's Signature X _____