New Creations Dance Studio and Performing Arts Center Liability Release Form for Dance and Events

I understand that there are risks of physical injury associated with, arising out of and inherent to the activity of dance/tumbling and use of the bounce house and inflatable slide. In recognition of this acknowledged risk of injury, I knowingly and voluntarily

waive all right and/ or causes of action of any kind, including any and all claims of negligence arising as a result of such activity from which liability could accrue to New Creations Dance Studio and Performing Arts Center and Hansen's Performing Arts LLC, it 'officers, agents, employees, instructors, subsidiaries, parent corporations, and all affiliated entities (hereinafter collectively referred to as "New Creations Dance Studio and Performing Arts Center". I hereby agree to release New Creations Dance Studio and Performing Arts Center and hold New Creations Dance Studio and Performing Arts Center and Hansen's Performing Arts LLC harmless of all liability, and hereby acknowledge that I knowingly and voluntarily assume full responsibility for all risks of physical injury arising out of active participation in dance on behalf of the participant. I am aware that this is a release of liability and an acknowledgement of my voluntary and knowing assumption of the risk of injury. I have signed this document voluntarily and of my own free will in exchange for the privilege of participation.

If I am a minor, my parent and / or legal guardian has also signed this document releasing New Creations Dance Studio and Performing Arts Center from any and all such liability described above and has acknowledged that I am knowingly and voluntarily assuming all risks of injury inherent to this activity. The participant has my permission to participate in New Creations Dance Studio and Performing Arts Center. I warrant the below information is complete and correct. I further release New Creations Dance Studio and Performing Arts Center and Hansen's Performing Arts LLC of all liabilities associated with my child's attendance at New Creations Dance Studio and Performing Arts Center.

Parent/ Guardian Signature	Date	
Participant's Name	Date	
Please list any medications the participant is taking, and any other special medical instructions.		
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New Creations Dance and Performing Arts Center PHOTO RELEASE FORM

I grant permission to New Creations Dance and Performing Arts Center and it's agents or employees, to use photographs of me, or the minor named below for use in studio publications including brochures, newspapers and the New Creations Dance and Performing Arts Center at www.newcreationsdance.com.

I grant New Creations Dance and Performing Arts Center the unrestricted right to use and publish photograph or video footage taken of me while participating in dance class, performing or in the company of New Creations Dance and Performing Arts Center. I waive any right to royalties or other compensation arising from the use of my photograph, and if signing on behalf of a minor named below, I waive all such rights of the minor named below.

I agree on my own behalf or on behalf of the minor child named below, to release and hold harmless New Creations Dance and Performing Arts Center and it's agents or employees from any claims arising from the related use of the photographs. I acknowledge that by signing this form I give New Creations Dance and Performing Arts Center full copyright and authority to publish photography and I agree to the terms listed above.

Name of student (please print):	
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Address & Telephone Contact:	
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Signature of non-minor student:	
Signature of parent or guardian:	
Date:	