



Liability Waiver and Acknowledgment of Risk:

REGISTRATION IS INCOMPLETE WITHOUT SIGNATURE AND MUST BE COMPLETED BEFORE CLASS

I understand and agree that in participating in any dance class, workshop, rehearsal or performance, there is a possibility of physical injury or death. 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 Kali's School of Dance classes, rehearsals, performances, or activities. I also exempt, release, and indemnify Kali's School of Dance, 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, injury, or death to me, my children, or property which may arise out of or in connection with participation in any classes or activities conducted by Kali's School of Dance. I further hereby voluntarily agree to waive my rights and that of my heirs and assigns to hold Kali's School of Dance, its owners, agents, volunteers, assistants, employees, guest artists, faculty members, and/or students liable for such damage, loss, injury, or death. I understand that I should be aware of my physical limitations and agree not to exceed them. I release Kali's School of Dance, its instructors, independent contractors, and all other associates from liability for harm, theft, or injury that may be suffered by me and/or members of my family traveling to or from or during participation in activities and programs sponsored by Kali's School of Dance. I hereby acknowledge that I am voluntarily assuming full responsibility for all risks of physical injury arising out of active participation in a dance class or other dance related activities. I release Kali's School of Dance, its instructors, independent contractors and all associates from liability for harm, injury or death pertaining to COVID-19 and other contagious diseases and viruses. 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.

Permission is granted Kali's School of Dance to use photographs of students for publicity purposes.

I have read, understood and agree to be bound by the above statement (please print your name, sign & date)

PRINT: _____

SIGN: _____

If under 18, parents or legal guardian must sign

STUDENT NAME: _____

DATE: _____