

6175 Shamrock Ct. Dublin OH 43016

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Liability Waiver: By signing below, I, as guardian or participant, hereby waive and release all claims, liabilities, actions, damages, costs or expenses of any nature whatsoever for injuries the participant might sustain, known or unknown, arising out of the program now or at all times in the future. I recognize and acknowledge there is risk associated with participating in the activities associated with dance instruction and I agree to assume total risk of any such activities connected with Columbus DanceArts Academy dance classes and related activities both on the premises and off site. I agree to indemnify and hold harmless Columbus DanceArts Academy and any instructors and employees associated with the academy from and against any and all liabilities, claims, actions, damages, costs or expenses of any nature whatsoever arising out of or in any way related, directly or indirectly, to dance instruction and related activities.

Dancer's Name		
Parent's Name		
Street Address		
City/State/Zipcode		
Phone		
Email		
Authorizing Signature	 )ate	