## Ms. Thing Productions, Inc. Ella Joyce's Funkacize Liability Waiver and Acknowledgment of Risk:

## **READ AND SIGN BELOW**

## REGISTRATION IS INCOMPLETE WITHOUT SIGNATURE AND MUST BE COMPLETED BEFORE CLASS

| I,  | understand and agree that in                                  |
|---|---|
| participating in any dance c                        | lass, workshop, rehearsal, or exercise program, there is      |
|   | y. I voluntarily agree, therefore, to assume all risks and    |
|   | jury or accident, which might occur to me during any of The   |
|   | s, performances, or activities. I also exempt, release, and   |
| •   | ctions, Inc., Ella Joyce's Funkacize., its owners, agents     |
| · · · · · · · · · · · · · · · · · · ·               | oyees, guest artists, faculty members, from any and al        |
| •   | r causes of action whatsoever from any damage, loss, o        |
|   | which may arise out of or in connection with participation is |
| •   | ducted by Ella Joyce's Funkacize classes. I further hereby    |
| • •   | y rights and that of my heirs and assigns to hold Ms. Thing   |
|   | s Funkacize, or Elite Dance & Performing Arts Center, it      |
|   | ssistants, employees, guest artists, faculty members, and/o   |
|   | nage, loss, injury, seizures, or death. I understand that     |
| * * *   | ical limitations and agree not to exceed them. This Waive     |
| remains on file and covers ret                      |   |
| photographs for publicity pur                       | Is Thing Productions, Inc. Ella Joyce's Funkacize to use      |
| photographs for publicity pur                       | poses.  |
| I HAVE FULLY INFORMED IN<br>HAVE READ THE SAME PRIO | MYSELF AS TO THE CONTENTS OF THIS RELEASE AND OR TO SIGNING.  |
| Dancer's Name (PRINT                                | TED):   |
| SIGNED:   |   |
| DATED:  |   |
| Phone:  | Email:  |
| Mailing address:                                    |   |
|   |   |

WAIVER AND RELEASE FROM LIABILITY FOR DANCE INSTRUCTION

-END

**Official Use**