

JENNY'S DANCE DYNAMICS, LLC
STUDENT RELEASE FORM
2008-2009

STUDENT'S NAME _____ BIRTHDATE _____

STUDENT'S SCHOOL _____ GRADE _____ AGE _____ SEX _____

PARENT/GUARDIAN'S NAME _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ PARENT/GURADIAN (CELL PHONE) _____

EMAIL ADDRESS _____

EMERGENCY CONTACT (OTHER THEN PARENT/GUARDIAN) _____

PHONE _____

1. Does student have any medical problems the teacher should be aware of (i.e. Allergies)? If yes, please explain:

2. Does student have any physical defects which would slow progress such as: Weak or fallen arches, foot that turns in or out when walking, weak knees, etc? If yes, please explain:

**** RELEASE ****

IN CONSIDERATION of allowing the student named above to enroll at Jenny's Dance Dynamics, LLC and use of the premises of Jenny's Dance Dynamics, LLC, the undersigned, being the legal and acting guardians of the student, acting for themselves and/or on behalf of the student, release and hold harmless Jenny's Dance Dynamics, LLC, its owners, employees, and agents of and from any and all liability, claims, demands, actions, and causes of action whatsoever, arising out of or related to any loss, property damage, or personal injury, including death, that may be sustained by the student and/or the undersigned, while in or on the premises upon which the program is conducted, or incurred while in or on any premises under the control or supervision of Jenny's Dance Dynamics, LLC, its owners, employees, and agents, or incurred while enroute to or from any said premises, or incurred while on any other premises or place while undertaking activities of whatever kind or nature related to activities sponsored by or participated in by Jenny's Dance Dynamics, LLC, its owners, employees, and agents.

The undersigned, being duly aware of the risks and hazards inherent in participation in dance, tumbling, and other movement activities being conducted by Jenny's Dance Dynamics, LLC, and acting for themselves and the student, hereby elect voluntarily to enter upon said premises under the control of Jennifer Frank. The undersigned, acting for themselves and the student, hereby voluntarily assume all risks of loss, property damage or personal injury, including death, which may be sustained by the student and/or the undersigned, while in, or on said premises described above.

The owner may, but shall not be obligated to carry insurance on the student and/or the undersigned, and the existence if insurance shall not change, alter, or increase the liability of the owner to the student and/or the undersigned or affect the terms of this release.

This release shall be binding upon the distributes, heirs, next of kin, personal representatives, executors and administrators of the student and each of the undersigned.

In signing the release, each of the undersigned hereby acknowledges and represents:

- a) That he or she has read the foregoing release, understand, it, and signs voluntarily;
- b) That the undersigned signing as "legal guardian" is in fact a true legal guardian of the student; each of the undersigned is over 21 years of age and of sound mind, and has signed this release with the knowledge and consent of the participant, and each of the undersigned understands that this release related to any and all claims of the student and the undersigned.

PARENT/GUARDIANS SIGNATURES

DATE _____