



LIABILITY WAIVER FORM

I/ we realize that participation in acrobatics, hip hop, and heels classes could involve some possible personal injury. Despite precautions, accidents and injuries may occur. By signing this release form, I/ we (the student and parent/ guardian) assume all risks related to the use of any and all spaces used by *The Spot Guilford Acrobatics Co. LLC*.

I/ we agree to release and hold harmless *The Spot Guilford Acrobatics Co. LLC* including its owner, teachers, students, staff members, and facilities, from any cause of action, claims, or demands now and in the future. I/ we will not hold *The Spot Guilford Acrobatics Co. LLC* liable for any personal injury or any personal property damage which may occur on the premises before, during, or after classes. Furthermore, I/ we agree to obey the class and facility rules and take full responsibility for my/ our child(ren)'s behavior in addition to any damage I/ we may cause to the facilities utilized by *The Spot Guilford Acrobatics Co. LLC*.

Student's Name: _____ Age: _____
(Print)

Student's Name: _____ Age: _____
(Print)

Student's Signature: _____ Date: _____
(If unable to sign, parent/guardian sign only)

Student's Signature: _____ Date: _____
(If unable to sign, parent/guardian sign only)

Parent/Guardian Name: _____ Phone: _____
(Print)

Parent/Guardian Signature: _____ Date: _____

E-Mail _____ Phone _____