

**The Institute for Dance, Inc**  
**Studio Waiver and Consent Form**

I hereby waive, release, and forever discharge all rights and claims against the Institute for Dance, Inc., and/or involved staff for damages or injury sustained by me or my child while in classes or on studio premises before or after class, or at any other studio activities including but not limited to recitals, workshops, camps, performances, and visits to surrounding community businesses.

I understand and agree that the Institute for Dance, Inc. and staff may administer first aid on the Institute for Dance, Inc. premises in the event of minor injuries. Guardians will be notified if basic first aid is provided on their child.

I authorize the Institute for Dance, Inc. to use photos taken of me or my child while at dance or dance functions for marketing and promotional materials, including website. I acknowledge that my child be videotaped for educational and performance purposes only, including but not limited to recital(s).

Please note that the Institute for Dance, Inc. agrees to not make public or resell any private information provided to it by students and their families.

**I have read the forgoing waiver and agree with it in all respects.**

Student Name: \_\_\_\_\_

Print Guardian Name: \_\_\_\_\_

Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**I have read and understand the handbook policies and procedures and agree to abide by them.**

\_\_\_\_\_  
Signature of Parent/Guardian or Adult Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Institute for Dance representative

\_\_\_\_\_  
Date

