



ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM VIRTUAL DANCE CLASSES

I, PARENT/GUARDIAN OF SAID CHILD(REN) HEREBY ASSUME ALL OF THE RISKS OF MY CHILD(REN) PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH THESE VIRTUAL DANCE CLASSES, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective reigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of my child(ren), for my child(ren)'s death, disability, personal injury, or actions of any kind which may hereafter occur to my child(ren) during VIRTUAL DANCE CLASSES BY THE FOLLOWING ENTITIES OR PERSONS: *Providence Ballet Inc.* and/or their directors, employees, or volunteers.

(B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE THE FOLLOWING ENTITIES OR PERSONS: *Providence Ballet Inc.* and/or their directors, employees, or volunteers from any and all liabilities or claims made as a result of participation in VIRTUAL DANCE CLASSES, whether caused by the negligence of release or otherwise. I acknowledge that *Providence Ballet Inc.* and their directors, employees, and volunteers are NOT responsible for errors, omissions, acts, or failures to act of any party or entity conducting VIRTUAL DANCE CLASSES on their behalf. I acknowledge that this activity may involve injury. The risks include, but are not limited to, those caused by jumping, leaping, turning, stretching, or any dance movement, lack of hydration, improper dance floor, and actions of other people including, but not limited to, participants, and/or producers of the activity.

I hereby consent for my child to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during VIRTUAL DANCE CLASSES. I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT. I SIGN IT OF MY OWN FREE WILL. I certify that my child(ren) is physically fit, has sufficiently prepared or trained for participation in VIRTUAL DANCE CLASSES, and has not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my child(ren)'s participation in VIRTUAL DANCE CLASSES. I acknowledge that this Accident Waiver and Release of Liability Form will be used by *Providence Ballet Inc.*, the director, class holders, sponsors, and organizers of the activity in which my child may participate, and that it will govern my child(ren)'s actions and responsibilities at VIRTUAL DANCE CLASSES. I permit my child to participate in VIRTUAL DANCE CLASSES.

Participant's Name(s)

Parent/Guardian

Date