



# Houston Dance Works

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I represent that \_\_\_\_\_ is in good health and physically capable of participating in dance classes and/or exercise classes, rehearsals and performances. On behalf of myself and the above named student I hereby waive and release any claim against Houston Dance Works, Autumn Rosemond, the faculty, employees, and staff of Houston Dance Works arising out of a personal injury occurring in connection with classes, rehearsals or performances or otherwise occurring in or around the dance studio or other location of rehearsals or performances. Houston Dance Works shall not be liable for any damages arising from personal injuries incurred by me/my child, on or about the premises of Houston Dance Works studio/program, occurring as a result of contact with other students, instructors, walls, equipment, floors, structure poles, and other objects located in or near the dance studio, or my/my child's physical condition or physical limitations. I do hereby fully and forever release and discharge Houston Dance Works, its directors, officers, dance instructors, employees and agents, and their heirs, executors, and administrators from any and all claims, demands, damages, rights of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of my/my child's use of said Houston Dance Works dance studio/program, dance classes, facilities, and equipment thereof, and waive all claims arising out of dance instruction, rehearsal training, and performances at Houston Dance Works and/or other performance spaces. I accept responsibility for obtaining appropriate accident, health, and hospitalization insurance to cover the student in the event of personal injury. In the event of injury or other medical emergency, if I cannot be reached, I authorize a representative of Houston Dance Works to seek any medical assistance reasonably required and agree to be responsible for any medical expenses incurred on behalf of the student. This agreement is governed by and interpreted under the laws of the State of Texas.

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Dancer's Name: \_\_\_\_\_ Age: \_\_\_\_\_  
(Print)

Dancer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(If unable to sign, parent/guardian sign only)

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Print)

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_