



Whirl Liability Release for _____ (Student)

I agree to be solely responsible for any and all damages, costs, and expenses incurred as a result of any occurrences or injuries sustained to me or my student(s) (under 18 years of age) from participation in this program and further agree to hold free and harmless NORTH COUNTY DANCEARTS, INC. and WHIRL BALLROOM, all Directors, staff and instructors for any such injury. I understand that classes at WHIRL BALLROOM may be physically strenuous and I and or my student(s) voluntarily participate in them with full knowledge that there is risk of personal injury, property loss or death. I agree that neither I, my heirs, assigns or legal representatives will sue or make any other claims of any kind whatsoever against WHIRL BALLROOM or its owners, staff, instructors, members for any personal injury, property damage/loss, or wrongful death, With my signature below, I acknowledge the stated Release of Liability. I understand that WHIRL BALLROOM is in no way responsible for the safekeeping of my personal belongings while I attend class whether caused by negligence or otherwise. Check with your doctor first before participating in any exercise program.

X

Student Signature (Parent Signature if student is under 18 years of age)

Date