WAIVER COPIES

LIABILITY WAIVER

In consideration for participating in dance and/or tumbling, organized by The Studio of Dance and Arts, I, the undersigned, hereby agree to release and discharge The Studio of Dance and Arts, its officers, directors, independent contractors, subcontractors, agents, volunteers, and affiliates from any and all claims, liabilities, demands, actions, causes of action, costs, and expenses, whether at law or in equity, whether known or unknown, arising out of my participation in the said activity/event. I acknowledge that participation in dance and/or tumbling involves certain risks and hazards, including, but not limited to, bodily injury, property damage, and the risk of contracting illness or communicable diseases. I voluntarily assume all such risks and hazards, and I agree to follow all instructions, rules, and guidelines provided by The Studio of Dance and Arts and its representatives. I hereby release, discharge, and hold harmless The Studio of Dance and Arts from any and all liability, claims, demands, actions, or causes of action whatsoever arising out of any damage, loss, injury, or death to me or my personal property that may occur during my participation in dance and/or tumbling, including those which may be caused by the negligence of The Studio of Dance and Arts, its officers, directors, employees, independent contractors, subcontractors, agents, volunteers, or affiliates.

I understand that this release includes, but is not limited to, any claims based on any negligence, action, or inaction of The Studio of Dance and Arts, its officers, directors, employees, independent contractors, subcontractors, agents, volunteers, or affiliates. I also understand that this waiver and release extends to any claims I may have against The Studio of Dance and Arts arising out of my participation in dance and/or tumbling.

I acknowledge that I have read and understand this Liability Waiver and Release Form in its entirety, and I am signing it voluntarily. I am aware that by signing this form, I am giving up certain legal rights, including the right to sue The Studio of Dance and Arts for any damages, injuries, or losses that I may incur.

This waiver and release shall be binding upon my heirs, executors, administrators, and assigns. This agreement is governed by the laws of Montana, USA, and any disputes arising from it shall be resolved in the appropriate courts of Montana, USA.

| Participant's Information: | |
|--|-----------------------|
| Full Name: | |
| Date of Birth: | |
| Parent/Guardian Information (if participant is a | minor): |
| Full Name: | |
| Relationship to Participant: | |
| Email Address: | |
| Date of Agreement: | |
| Participant or Parent/Guardian Signature (if par | ticipant is a minor): |
| | |
| | |
| (Signature) | |
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