**WAVIER RELEASE OF LIABILITY READ CAREFULLY - THIS AFFECTS YOUR LEGAL RIGHTS** In exchange for participation in the activities organized by River Valley Dance Project, of 500 Main Street Suite 5, Deep River, Connecticut, 06417 and/or use of the property, facilities, and services of River Valley Dance Project, I agree for myself and (if applicable) for the members of my family, to the following:

1. **AGREEMENT TO FOLLOW DIRECTIONS.** I agree to observe and obey all posted rules and warnings, and further agree to follow any oral instructions or directions given by River Valley Dance Project, or the employees, instructors, or agents of River Valley Dance Project.

2. **ASSUMPTION OF THE RISKS AND RELEASE**. I recognize that there are certain inherent risks associated with the above described activity and I assume full responsibility for personal injury to myself and (if applicable) my family members, and further release and discharge River Valley Dance Project for injury, loss or damage arising out of my or my family's use of or presence upon the facilities of River Valley Dance Project, whether caused by the fault of myself, my family, River Valley Dance Project or other third parties.

3. **INDEMNIFICATION**. I agree to indemnify and defend River Valley Dance Project against all claims, causes of action, damages, judgments, costs, or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family's use of or presence upon the facilities of River Valley Dance Project.

4. **FEES.** I agree to pay for all damages to the facilities of River Valley Dance Project caused by any negligent, reckless, or willful actions by me or my family.

5. **CONSENT**. I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_of (address)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, consent to the participation of my \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the activity of Dance, Yoga, or Fitness, Capoeira and agree on behalf of the above minor to all of the terms and conditions of this Agreement. By signing this Release of Liability, I represent that I have legal authority over and custody of above said person.

6. **NO DURESS**. I agree and acknowledge that I am under no pressure or duress to sign this Agreement and that I have been given a reasonable opportunity to review it before signing.

7. **EMERGENCY CONTACT**. In case of an emergency, please call \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Day), or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Evening).

8**. I HAVE READ THIS DOCUMENT AND UNDERSTAND IT**.

**Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Email**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_